

File Name: SOUTH HILL

TRANSYLVANIA COUNTY HEALTH DEPARTMENT ⁸⁵⁸⁵⁻¹⁵
ON-SITE WASTEWATER DISPOSAL APPLICATION ⁵³⁸⁵⁻⁰⁰⁰

~~8585-15-1333-000~~

Pin #/Tax ID

Permit #:

Receipt No 0075 9250

Agent/Owner: BRYSON, CHARLES JOSEPH

Mailing Address: P.O. Box 4 Playah Forest, NC

Home Phone #: () 806-7129

Work Phone #: ()

Proposed Buyer: New Owner: Charles Battle

Mailing Address:

Home Phone #: ()

Work Phone #: ()

Property Location: South Hill Drive Subdivision: South Hill Phase/Sec: Lot #: 2
Road/Street

Directions to property: Hwy. 64 west to left on Clazener - 1/4 mile - right on South Hill - lots
are marked

Flood Zone		
Is the property in a flood zone?		
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Unknown
Inspections		
Flood Zone		
<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<input type="checkbox"/> Approved	<input type="checkbox"/> Disapproved	
Initials <u> </u>	Date <u> </u>	

Installation for: Mobile Home Single Double House No. Bedrooms: 3 Basement: Yes No With Plumbing: Yes No Ind./Commercial Other

If Indust./Commercial/Other: Number of employees: Operation: (Describe) Property contains designated wet lands: Yes No

Lot size: .33 Date lot recorded: Right of ways, easements, etc. Water Supply: Private: Spring Well Shared Supply UNSURE Public/Community

I certify the above to be correct to the best of my knowledge. Permission is hereby granted to perform a site/soil evaluation on the property described above. If the information submitted in this application is falsified or changed, the permit shall become void. I understand that it is my responsibility as the applicant/agent/owner to comply with all applicable ordinances, laws, and rules from other agencies that may affect the development of this property.

Applicant/Agent Signature:

Date: 7-20-05

**ON-SITE WASTEWATER DISPOSAL SYSTEM
OPERATIONS PERMIT**

The issuance of this operations permit certifies that the system described on the improvement permit and the construction authorization is properly installed or repaired and that the system is capable of being operated in accordance with the conditions of the improvement permit, Article 11 of Chapter 130A of the General Statutes of North Carolina and the rules adopted pursuant to this Article. This operation permit shall remain in effect as long as the system is operated and maintained as required by the Laws and Rules for Sewage Treatment and Disposal Systems as issued by the North Carolina Department of Environment and Natural Resources, Division of Environmental Health.

System Classification Type: IIIg/IIa EZFLOW Management Entity: Owner Certified Operator Minimum inspection/maintenance review frequency N/A years.

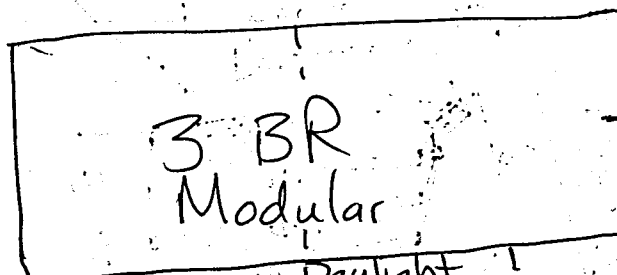
Comments: Clean + Replace septic tank effluent filter as req'd
Maintain 5' minimum setback from system to decks

Installed by: Darrell Donaldson Final Inspection by: James A Bayer, RS Date: 10/4/06
(Candler, NC)

Glazener Rd

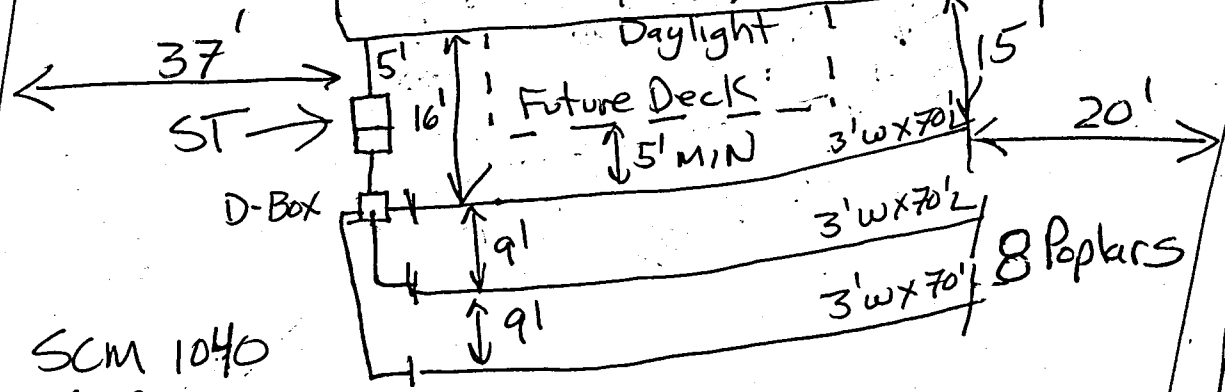
Lot 2
"As Built"
10/4/06
JB

Drive



Garages

3 BR
Modular



SCM 1040
STB 318
8/03/06

EZFLOW

8 Poplars

P/L

P/L

100'

Stream

File Name: SOUTH HILL

TRANSYLVANIA COUNTY HEALTH DEPARTMENT ON-SITE WASTEWATER DISPOSAL APPLICATION

8585-15-1335-000
Pin #/Tax ID _____

Permit #: 05-432

Receipt No 0075 0250

Agent/Owner: RYEON, CHARLES JOSEPH Mailing Address: P.O. Box 4 Blough Forest, NC

Home Phone #: () 603-7199 Work Phone #: () _____

Proposed Buyer: New Owner: Charles Battle Mailing Address: _____

Home Phone #: () _____ Work Phone #: () _____

Property Location: South Hill Drive Subdivision: South Hill Phase/Sect.: _____ Lot #: 2
Road/Street

Directions to property: Hwy. 64 west to left on Glazner - 1/4 mile - right on South Hill - lots
are marked

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Inspections		
Flood Zone		
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<input type="checkbox"/> Approved	<input type="checkbox"/> Disapproved	
Initials _____	Date _____	

Installation for: Mobile Home Single Double House No. Bedrooms: 3 Basement: Yes No With Plumbing: Yes No Ind./Commercial Other

If Indust./Commercial/Other: Number of employees: _____ Operation: (Describe) _____ Property contains designated wet lands: Yes No

Lot size: .93 Date lot recorded: _____ Right of ways, easements, etc. _____ Water Supply: Private: Spring Well Shared Supply Public/Community

I certify the above to be correct to the best of my knowledge. Permission is hereby granted to perform a site/soil evaluation on the property described above. If the information submitted in this application is falsified or changed, the permit shall become void. I understand that it is my responsibility as the applicant/agent/owner to comply with all applicable ordinances, laws, and rules from other agencies that may affect the development of this property.

Applicant/Agent Signature: _____ Date: 7-20-05

AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION (Diagram and Conditions Attached)

New Installation: Repair/Addition: Original Permittee: _____ Dated: _____

Design waste flow: 360 GPD LTAR: .4 Septic Tank Capacity: 1000 gal./min. Pump Tank Capacity: _____ gal./min. Proposed Wastewater System: EZ Flow

Drainfield: Total Trench Length: 210 ft. Square Footage: EQ 900 Trench spacing: 9 ft. on ctr. Individual Trench Length: 70 ft. Maximum Trench Depth (Low Side): 18 in. Trench Width: 36 in.

Distribution Method: DBOX or serial feed (Min. distance between system and nearest Well: 100 ft. Water line: 10 ft. Foundation: 5 ft. Property line: 10 ft. Vertical Cut: 15 ft.)

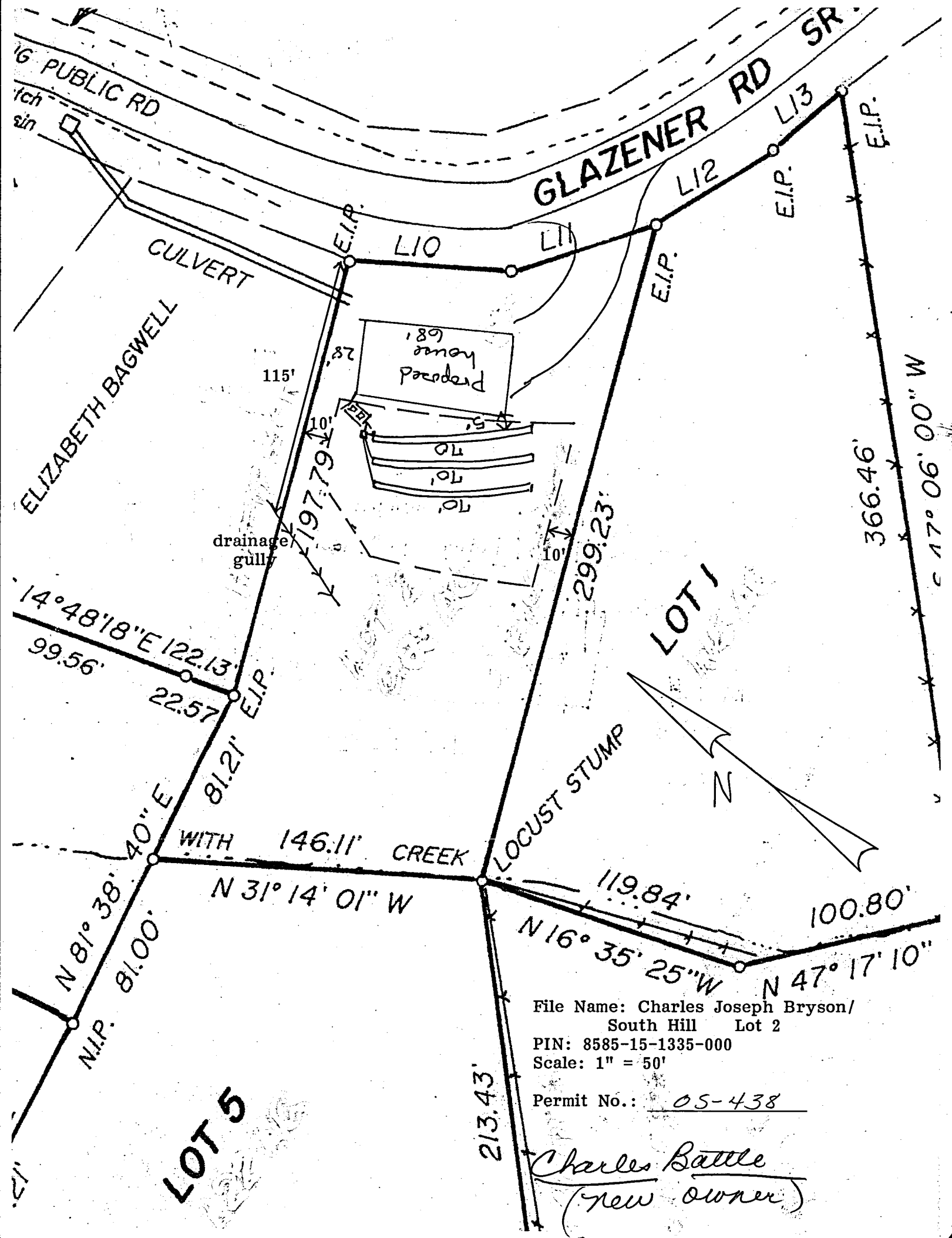
Comments & Special Conditions: 35% warranty paperwork to be completed prior to issuing the "OP"
Keep drainfield trenches in original soil (no fill dirt).

Construction of the wastewater system for the permit indicated is hereby authorized. The wastewater system described in the improvement permit has been designed and can be installed and operated in compliance with Article 11 of Chapter 130A of the General Statutes of North Carolina and Rules adopted pursuant to this Article. This Construction Authorization is valid for a period of 5 years from the original date of issue. The Construction Authorization must be renewed upon expiration prior to the installation/repair of the wastewater system, or prior to the issuance of any required building permits. A pre-construction conference with the owner or developer, or an agent of the owner or developer, and the health department will be required for re-issuance of the Construction Authorization.

I agree to install the wastewater disposal system in accordance with the improvement permit, construction authorization and any conditions specified therein.

Signed: [Signature] Date: 5/26/06 Construction Authorization prepared by: [Signature] Date: 9/2/2005

PERMIT AND CONSTRUCTION AUTHORIZATION MUST BE ON SITE DURING ALL PHASES OF CONSTRUCTION/INSTALLATION AND INSPECTION



16' PUBLIC RD

GLAZENER RD SR

ELIZABETH BAGWELL

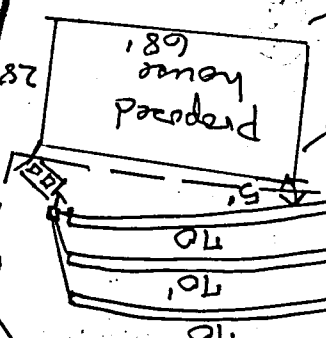
CULVERT

L10

L11

L12

L13



drainage gully

LOT 1

LOT 5

LOCUST STUMP

N

14°48'18"E 122.13'

99.56'

22.57'

E.I.P.

40° E

81.21'

WITH

146.11' CREEK

N 31° 14' 01" W

N 81° 38' 40" E

81.00'

N.I.P.

213.43'

299.23'

119.84'

100.80'

N 16° 35' 25" W

N 47° 17' 10"

366.46'

17° 06' 00" W

File Name: Charles Joseph Bryson/

South Hill Lot 2

PIN: 8585-15-1335-000

Scale: 1" = 50'

Permit No.: 05-438

Charles Battle
 (new owner)