PIN: 8512-46-3809-000 File Name: Lake Tox. Est., Lot 24R, TM PHI Permit No.: 22-063

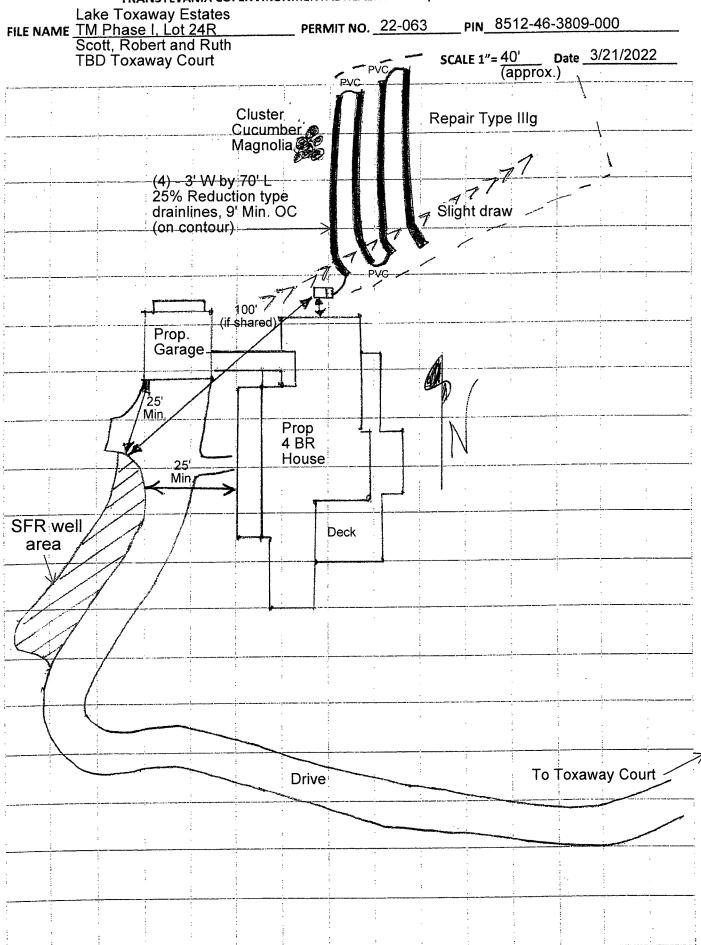
TRANSYLVANIA COUNTY DEPARTMENT OF PUBLIC HEALTH

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

ISSUED TO: Scott, Robert and Ruth	PROPERTY LOCATION: TBD Toxaway Court	
New ☑ Repair ☐ Expansion ☐ Type of Structure: Proposed 4 BR House Proposed Wastewater System Type: Type Illg - 25% reduction Projected Daily Flow: 480 GPD Number of bedrooms: 4 Max. No. of Occupants:	Site Improvements required prior to Construction Authorization Issuance: Accurate, detailed site plan provided. House site has been staked, fee has been paid.	
Pump systems with an effluent pump must be designed by a Professional Type of Water Supply: New SFR well	final location and elevations of facilities Engineer (P.E.) and plans submitted to the Environmental Health Section for approval. Improvement Permit Expiration Date: 3/22/2027	
Permit conditions:		
	See Attached Permit Diagram Ith Section in no way guarantees the issuance of other permits. The permit holder is requirements. This permit is subject to revocation if the site plan, plat, or the intended use	
	of the site. This permit is subject to compliance with the provisions of the Laws and Rules for	
SELF-INSTALLATION NOT PERM		
(Require	ction Authorization d for Building Permit)	
The construction and installation requirements of Rules .1950, .1952, .1954, shall be met. Systems shall be installed in accordance with the attached syst	.1955, .1956, .1957, .1958,and .1959 are incorporated by reference into this permit and em layout.	
ISSUED TO: Same	Facility Type: Proposed 4 BR House	
Basement?	ent Plumbing Fixtures?	
Type of Wastewater System** Type IIIg - 25% reduction of the state of	ction (Initial) Wastewater Flow: 480 GPD	
(See note below, if applicable D) Same	(Repair) LTAR: 0.45 GPD/ft2	
Installation Requirements/Conditions		
Septic Tank Size: 1,000 gallons, minimum Total Tree	nch Length: 280 feet Trench Spacing: 9 Feet on Center	
Pump Tank Size gallons, minimum Trench W	Vidth:3feet Distribution Method: Serial - PVC only	
Trenches shall be installed on contour at a maximum trench depth of: 18 inches. There shall be a minimum of 6" of soil cover over the installed drainfield material and the bottom of the trench shall not be greater than 36" from the surface of the ground at final grade. (Trench bottoms shall be level to +/- ¼" in all directions)		
>50' SFR Min. distance between system and nearest: Well	10 ft Foundation 5/15 ft Property Line 10 ft. Vertical Cut 15 ft	
Permit Conditions: Install system below cluster cucumbed due to shallow soil conditions on either	er magnolia tree as shown on diagram. Keep line lengths at 70' er side of approved area. Contact TCDPH with any questions.	
**II applicable: **II applicable: **Windy Man Applicable: **Owner/Legal Representatives Signature:	Date: 325/2022	
This Construction Authorization is subject to revocation if the site plan, plat when there is a change in ownership of the site. This Construction Authoriza Treatment and Disposal and to the conditions of this permit. I agree to have Improvement Permit, Construction Authorization, permit diagram and any	, or the intended use changes. The Construction Authorization shall not be transferred ation is subject to compliance with the provisions of the Laws and Rules for Sewage the on-site wastewater system installed by an authorized installer in accordance with the conditions specified therein.	
Authorized State Agent: James a Bayer, REHS Date of Issuance: 3/22/2022		
See Attached Permit Diagram Construction Au	thorization Expiration Date: 3/22/2027	

TRANSYLVANIA CO. ENVIRONMENTAL HEALTH SEPTIC/WHILE PERMIT DIAGRAM





Permit Expires: 3/22/2027

TRANSYLVANIA PUBLIC HEALTH WELL PERMIT/WELL REPAIR PERMIT

106 E Morgan St. Suite 105 Brevard, NC 28712 828-884-3139

WP 22-034	8512-46-3809-000	Scott, Robert and Ruth	
Permit No.	PIN	Issued To	
Associated Permits: Septic # 22-06	Address/Locat	cion_TBD Toxaway Court	
***************************************	M SEPARATION REQUIRED BETWEEN WELL AND AN		
25' MINIMUM SEPARATION REQUIRED BETWEEN WELL AND ANY PART OF ANY BUILDING FOUNDATION, DECK, PORCH, GARAGE, CARPORT, ETC. SEE WELL PERMIT DIAGRAM FOR ALLOWABLE WELL LOCATION(S)			
CONTACT TCDPH WITH ANY QUESTIONS!			
Permit valid for 5 years provided site conditions do not change. The well (well area) located by the Health Department is to provide protection from known possible sources of contamination. No quantity or quality of water is guaranteed at any site by the Health			
Department.			
Issued by:	Bayer, REHS	Date: 3/22/2022	
Issued to:	4-	Date: $3/25/22$	

TRANSYLVANIA CO. ENVIRONMENTAL HEALTH 流流域 WELL PERMIT DIAGRAM

