PERMIT NUMBER 09716

Union County Health Departm
55 Hughes St., Suite A, Blairsville, GA 30512

BUILDING PERMIT NO. 347

RECEIPT NUMBER 7994

APPLICATION FOR CONSTRUCTION PERMIT AND SITE APPROVAL FOR ON-SITE SEWAGE MANAGEMENT SYSTEM

(DATES) 9-10-99

MAILED ☒ GIVEN ☐

Subdivision, Street or Road 3925 Southern Ridge

Property Location (Address, Block, Lot, Directions to Property)
Southern mill Lot #43

Property Owner's Name R. Proffitt

MUST BE INSPECTED CALL (706) 745-6292 BEFORE 9 AM

Date 9-1-98

Owner's Address 1648 Ridge Rd. Blairsville

Phone No. 745-0672

Permit Applicant's Name and Address

Phone No.

Type Facility (Residence, Church, Motel, Restaurant, etc.)

Water Supply ☒ Public ☐ Community ☐ Individual

Garbage Disposal ☒ Yes ☐ No

No. of Bedrooms or No. of Gallons Per Day 3

Lot Size 1.057

Soil Conditions (Absorption Field)
Purcolation Rate 35 Min/In; Water Table or Rock Depth _____ Feet; Soil Type Ewond

Total Capacity
Septic Tank 1000 Gals.
Dosing Tank _____ Gals.
Grease Trap _____ Gals.

Absorption Field Area
Total Sq. Ft. _____
Total Linear Ft. 21 Joints
Trench Width In. _____
Trench Depth In. _____

Type System

Level of Plumbing Outlet
☐ Ground Level
☐ Split Level
☐ Basement

Field Layout Method
☐ Distribution Box ☐ Mound
☐ Level Field
☐ Serial Distribution
☐ Other (Explain below)

I hereby apply for a construction permit to install an on-site sewage management system and agree that the system will be installed to conform to the requirements of the rules of the Georgia Department of Human Resources, Chapter 290-5-25. I understand that final inspection is required and will notify the County Health Department upon completion of construction and before applying final cover.

A permit is hereby granted to install or construct the on-site sewage management system described above. This permit is not valid unless properly signed below, and expires twelve (12) months from date of issue.

Issuance of a construction permit for an on-site sewage management system, and subsequent approval of same by representatives of the Georgia Department of Human Resources or County Board of Health shall not be construed as a guarantee that such systems will function satisfactorily for a given period of time, furthermore, said representatives do not by any action in effecting compliance with these rules, assume any liability for damages which are caused, or which may be caused, by the malfunction of such system.

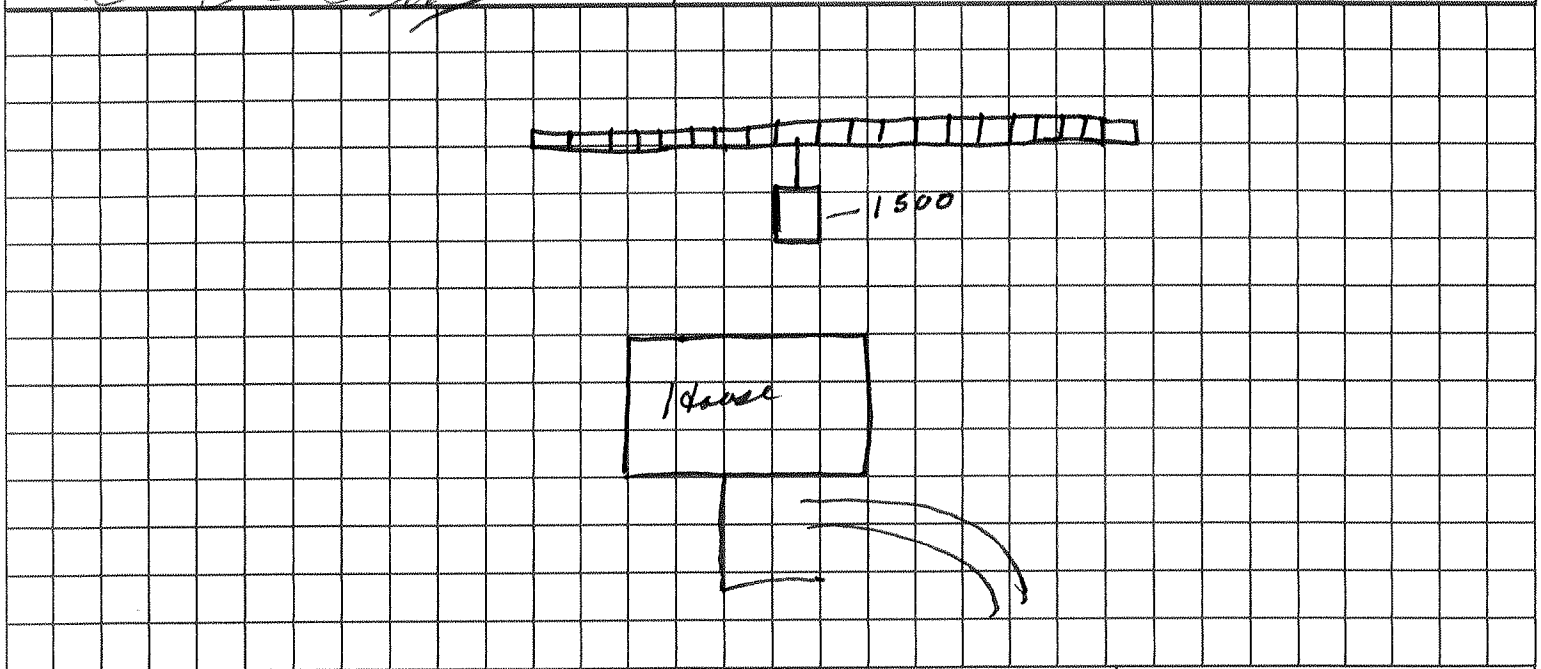
☐ Experimental ☐ Yes ☐ No

ARE THERE ANY WELLS OR SPRINGS WITHIN 100' OR STREAMS WITHIN 50'?

☐ Yes ☐ No

Signature (Owner or Applicant)

Remarks



Approved by (Health Department Representative) Michael Scott

Date of Issue 1-14-99

Date Inspected 8-5-99

Proposed Layout: Final Inspection

Approved ✓ Yes _____ No