## BUNCOMBE COUNTY DEPARTMENT OF HEALTH ENVIRONMENTAL HEALTH SERVICES (828-250-5016) IMPROVEMENT PERMIT FOR WASTEWATER SYSTEM CONSTRUCTION

Property Owner: Agerican Conservation trist Property Location: 406 Hemlock Springs TV. Application Date: 4/15/19
Directions: Jupites Rel, left on Mchean Rel, left on Henlak Springs Tail
Subdivision: Twin Brook Lot# 38 = 39
Water Supply:  ☐ Private Well ☐ Shared Well ☐ Spring ☐ Municipal ☐ Public/Community Existing Wells: ☐ Yes ☐ No
Minimum Separation Distance to Well (includes system and repair area):ft
System Design: Residential Commercial Multiple Unit Dwelling: No. of Units Bedrooms/per unit Max. # of occupants/per unit
☐ House ☐ Mobile Home (☐ single ☐ double) Bedrooms 2 Max. # of occupants 4 Basement: ☐ Yes ☐ No Basement Plumbing: ☐ Yes ☐ No
Soil Group: TI LTAR: 0.2 Design Flow: 240
System Type:   Prefabricated Panel Block   Conventional   Large Diameter Pipe   Chamber   Expanded Polystyrene Aggregate   Other   Diameter Pipe   Chamber   Diameter Pipe   Diameter Pipe   Chamber   Diameter Pipe   Diameter Pip
**This permit does not give authority to install any type of septic system**
Room are that  St. 100.00  100.00  100.00  100.00  100.00  100  100.00  100
& Nighborg Well
This permit is valid only for a structure of this description or smaller
This permit is not limited to a structure of this description; however, no part of the structure shall extend into the designated area for the sewage treatment system
An Authorization to construct must be obtained when final plans are completed and exact type and location of building are established. For planning purposes, please be aware that building, driveways, excavation, fill dirt, or other obstruction may not be placed or constructed in any part of the area designated for the sewage treatment system. This permit is subject to revocation if the site is altered or the intended use changes from those described above.  A Building permit may not be issued until an Authorization to Construct is obtained
Issued By: Date: 5/13/19 Owner/Agent: Date:
THIS IMPROVEMENT PERMIT IS VALID FOR 5 YEARS FROM THE DATE OF ISSUANCE