

# TENNESSEE DEPARTMENT OF ENVIRONMENT AND CONSERVATION DIVISION OF WATER RESOURCES

## PERMIT FOR CONSTRUCTION OF SUBSURFACE SEWAGE DISPOSAL SYSTEM

|  | CHON OF BUDBURFACE SEWAG                     |   |  |  |
|--|--|---|--|--|
| Issued to: Bryan Dodge                     | Evaluation Based Upon:                       | Type of System:   |  |  |
|  | ( ) 1. Soil Typing by Soil Scientist         | (X) 1. Conventional   |  |  |
| Location:                                  | ( ) a. General                               | ( ) 2. Modified Conventional  |  |  |
| County: Giles                              | ( ) b. High Intensity                        | (X) 3. Conventional System Substitute                                 |  |  |
| Address: Lee Chapman Road                  | ( ) c. Extra High Intensity                  | (X) Chamber   |  |  |
| City: LAWRENCEBURG                         | ( ) 2. Soil Percolation Test                 | (X) Expanded Polystyrene  |  |  |
| Subdivision:                               | (X) 3. Environmental Scientist               | (X) Large Diameter Gravelless   |  |  |
| Lot #: 1                                   | Estimated Absorption Rate: 60 MPI            | Pipe  |  |  |
|  |  | Gravel backfill in a 24 in.   |  |  |
| Map: Group: Parcel:                        |  | wide trench required? No  |  |  |
|  |  | ( ) 4. Low Pressure Pipe  |  |  |
| Installation:                              |  | ( ) 5. Mound  |  |  |
| (X) 1. New Installation                    |  | ( ) 6. Lagoon   |  |  |
| ( ) 2. Repair to Existing System           |  | ( ) 7. Subsurface Drip System   |  |  |
| ( ) 3. System Modification                 |  | ( ) 8. Other:   |  |  |
| ( ) 4. Large System                        | Approval Based Upon: State No. T.            | C A 69 221 402  |  |  |
| Establishment:                             | ( ) (c) Percolation Test                     | ( ) (i) 9" Buffer required (24"-36" total                             |  |  |
| (X) 1. Residential: # Bedrooms 3           | ( ) (d) Grandfather Clause - Current         | soil depth)   |  |  |
|  | standards except those specified             | ( ) (k) Grandfather Clause - Meets                                    |  |  |
| ( ) 2. Other:<br>Gal/Day:                  | ( ) (f) 12" (karst) and 6" (non-karst)       | 1 1 1   |  |  |
| Gail Day.                                  | buffer required                              | June 30, 1990, standards (repair only) ( <b>X</b> ) Current Standards |  |  |
|  |  | ` '   |  |  |
|  | ( ) (m) 3 <sup>rd</sup> Party Permit Package | ( ) Other:  |  |  |
|  |  | Also Required:  |  |  |
| The system shall consist of a two-compartm |  | ( ) 1. Soil Improvement Practice (SIP)                                |  |  |
| gallons, with 330 linear feet in 3-5       |  | ( ) Curtain Drain   |  |  |
| and 24 (min) to 28 (max) inches in         | depth. (Depth of gravel: 12 inches)          | ( ) Drawdown Drain  |  |  |
|  |  | ( ) Interceptor Drain   |  |  |
| SIP Depth (in): SIP Length (ft):           |  | ( ) 2. Flow Diversion Valve   |  |  |
| SIP Comments:                              |  | ( ) 3. Sewage Pump  |  |  |
| General Comments:                          |  | Pump Flow Rate (gpm):   |  |  |
|  |  | TDH (ft):   |  |  |
| Drawing not to scale                       |  | ( ) 4. Single Compartment Pump  |  |  |
| Public water                               |  | Tank, Volume (gal):   |  |  |
|  |  | ( ) 5. Other:   |  |  |
|  |  | ( ) 5. Other.   |  |  |
|  |  |   |  |  |
|  |  |   |  |  |
|  |  |   |  |  |
|  |  |   |  |  |

All installers of subsurface sewage disposal systems must hold a valid annual license from the Tennessee Department of Environment and Conservation.

#### Please see attached drawing and supporting documentation.

The recipient of this permit agrees to construct or have constructed the above-described system in accordance with T.C.A. 68-221-401 et. seq. and The Regulations To Govern Subsurface Sewage Disposal Systems. If any part of the system is covered before inspected and approved, it shall be uncovered by the recipient of the permit at the direction of personnel of the Department of Environment and Conservation. Any cutting, filling or alterations of the soil conditions on the aforementioned property after this day may render this approval null and void.

| By: | Brennan Hood | Date: | 03/10/2025      |
|-----|--------------|-------|-----------------|
|     | (DWR Staff)  |       | (Date of Issue) |

## This permit is valid for 3 years from date of issue.

This is a permit to construct and is not intended to imply approval of any work proposed or completed on this lot.

CN-0762 (Rev. 10/22)

## Tennessee Department of Environment and Conservation - Division of Water Resources Permit for Construction of a Subsurface Sewage Disposal System



Issued To:

| Bryan Dodge |
| Lee Chapman rd |
| Tract 1 |
| 5.342 acres |

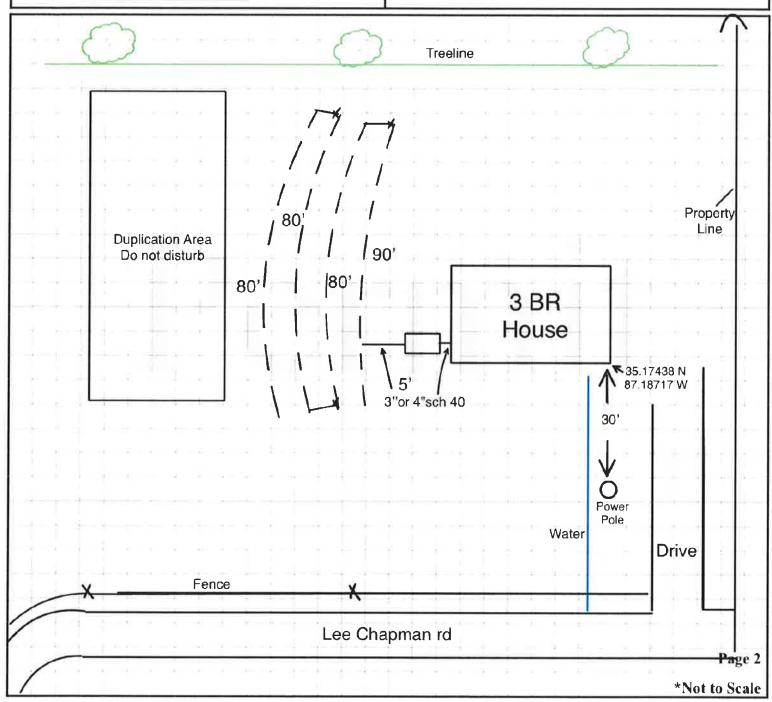
Brennan Hood ES III

Date: 3-11-25

Inspector:

### **General Notes:**

- Please refer to the design specifications for the subsurface sewage disposal system on the first page of the construction permit.
- Contact the local Division of Water Resources representative to schedule a final inspection.
- All electric components (e.g., pump, alarm, etc.) for the subsurface sewage disposal system must be inspected and approved by the appropriate electrical inspector prior to requesting a final inspection. Documentation of the electrical inspection must be available during the final inspection.









## TENNESSEE DEPARTMENT OF ENVIRONMENT AND CONSERVATION **DIVISION OF WATER RESOURCES**

**Land-Based Systems Unit** 

# William R. Snodgrass – Tennessee Tower

312 Rosa L. Parks Ave., 11th Floor Nashville, TN 37243-110

#### APPLICATION FOR WATER RESOURCES SERVICES APPLICANT COMPLETE QUESTIONS

| 1. Service Reques                      | ted (Check Service)                                  |                  | Fee  | es Duc           |   |                      |              |
|--|--|------------------|--|------------------|---|----------------------|--------------|
| X Septic Sys                           | stem Construction Permit                             |                  |  |                  |   |                      |              |
|  | Owelling   |                  | \$ 400   | 0.00             | PAID                                    |                      |              |
|  | Commercial: gdp                                      |                  |  |                  |   |                      |              |
|  | System Modification                                  |                  | <u>~</u>   |                  |   |                      |              |
| F                                      |  |                  | <u> </u>   |                  |   |                      |              |
|  | Conventional Construction Inspection                 |                  | £ 100  | 100              | DAID                                    |                      |              |
| Inspection                             |  |                  |  | 00.0             | PAID                                    |                      |              |
|  | of Verification                                      |                  |  |                  |   |                      |              |
| Water Sar                              |  |                  | 3  |                  |   |                      |              |
|  | Total Coliform                                       |                  |  |                  |   |                      |              |
|  | Secal Coliform                                       |                  | 01.  |                  |   |                      |              |
|  | e System Permit                                      |                  | 727  |                  |   |                      |              |
|  | e Construction Inspection                            |                  | 25   |                  |   |                      |              |
|  | iventional System Plan Review                        |                  |  |                  |   |                      |              |
|  | emative System Plan Review                           |                  |  |                  |   |                      |              |
|  | ntal System Plan Review                              |                  |  |                  |   |                      |              |
|  | on Evaluation: Lots:                                 |                  |  |                  |   |                      |              |
|  | Contractor - Septage Application                     |                  | S  |                  |   |                      |              |
|  |  | A DDL ICAN       | THE STATE OF THE S |                  | 614 4 1 1                               |                      |              |
| 2. LANDOWNER:<br>Names:                |  | APPLICAN         |  |                  | Site Add                                |                      | T 1          |
| Names.                                 | Bryan Dodge  | Names:           | Bryan Dodge  |                  | _ Adresss:                              | Lee Chapman Road     |              |
| Address:                               | 4303 Moore Lane                                      | Address:         | 4303 Moore Lane  |                  |   | 38464                | i, reimessee |
|  | Culleoka, Tennessee 38451                            |                  | Culleoka, Tennesso   |                  |   |                      |              |
| Day Phone:                             | 9312053294   | Day Phone:       | 9312053294   |                  | ======================================= |                      |              |
| Original Owner:                        |  | Email:           | wdavidso@realtrac  | cs.com           |   |                      |              |
| 3. LOCATION OF                         | LOT OR SITE: a) Subdivision                          | n Name:          |  |                  |   | Lot #                |              |
| 131                                    |  |                  |  |                  |   | have more than three |              |
| b) In a subdivisio                     | n? <u>No</u> Give spec                               | cific directions |  |                  |   |                      |              |
| c) Tax Map                             | SEFT   |                  | Parcel   |                  |   |                      |              |
| FOR SSDS PER<br>4. ONLY:               | a) Size of lot                                       | b) Number        | of Bedrooms 3  |                  | Redrooms A.                             | dded                 |              |
| c) How many occu                       |  | ated Basement    |  |                  | Deal Com 3 7                            | ducu                 | -            |
| e) Basement Plum                       |  |                  |  |                  |   |                      |              |
|  | r used monthly (gallons)                             |                  |  |                  |   |                      |              |
| g) Water Supply: I                     |  | Spring           |  |                  |   |                      |              |
| h) Is the lot staked                   |  | date it will be  | staked:  |                  |   |                      |              |
| Is the house stal                      | ced? yes   | If not, date     | it will be staked:   |                  |   |                      |              |
| i) Installer, if knov                  | vn:  |                  |  |                  |   |                      |              |
| 5. FOR INSPECTION                      | ON LETTER ONLY AND CERTIFICA                         | TE OF VERIE      | FICATION ONLY:   |                  |   |                      |              |
| a) Age of house                        | b) Is house  | vacant?          | How long?  | 1                |   |                      |              |
| <ul> <li>c) Original sewage</li> </ul> | •  |                  |  |                  |   |                      |              |
| d) Date of previou                     |  | Insp             | pected   |                  |   |                      |              |
|  | packing up" into plumbing fixtures?                  |                  | Surfacing or   | n the ground?    |   |                      |              |
|  | ncluding washing machines routed into sep            |                  | 117.11   | 0.1              |   |                      |              |
|  | AMPLE ONLY: a) Source of Supply: Spri                | 0                | Well   | Other            |   |                      |              |
| b) Is there an outsi                   | de faucet? c) is the sou casing 6" above the ground? | irce chlorinated |  | the annie =0     |   |                      |              |
|  | bove information is true and correct to the          |                  | Is a sanitary scal on  |                  | the charam                              |                      | bit alsi     |
|  | vironmental Services to the Division of W            |                  |  | authorized by    | me above n                              | tame tandowner to s  | suomit this  |
|  |  |                  |  |                  |   |                      |              |
| DATE: Feb 27, 202                      | SIGNATURE: Todd Davidsor                             | 1                | AMOUNT PAIL  | D: <u>500.00</u> | REC                                     | EIPT NUMBER:         | 3892820250   |
| CN-0971 (Rev. 1-18)                    |  |                  |  |                  | RDA's 2                                 | 2321 &2403           |              |

