

RABUN COUNTY BOARD OF HEALTH
19 LIBRARY CIRCLE CLAYTON, GA 30525
 APPLICATION FOR CONSTRUCTION PERMIT AND INSPECTION
 FORM FOR ON-SITE SEWAGE MANAGEMENT SYSTEM

Application Date: Oct 31, 2001

Permit Number: S-119-2001-00303
 Property Address: 1933 WORLEY CREEK RD
 LAKEMONT, GA 30552
 Lot Number:
 Subdivision:

Builder/Company:
 Owner's Name: GREG WILLIS
 Owner's Address: 520 GRIZZLY RIDGE RD
 LAKEMONT, GA 30552
 Phone: 782-2741
 Fax:

Facility Type: BARN	Water Supply: INDIVIDUAL	Plumbing Level:
Lot Size: 10.00	Garbage Disposal: No	Type System:
Gallons per Day:	Grease Trap: Gals.	Field Layout:
Percolation Rate:	Water Table:	Soil Type: TOXAWAY HAYWOOD
Absorption Field Area:		
Linear Ft: Square Ft:	Trench Width: Trench Depth:	Septic Tanks: Dosing Tank:
	Inches Inches	Gals. Gals.

Directions:
 OLD 441 S. TO WORLEY CK. RD. - ON PAST STAMP CK. ~~RD.~~ - 1933 WORLEY CK. RD.

Disclaimers:
 TRASH/BURIAL PITS MUST BE REPORTED TO THE HEALTH DEPARTMENT.

ALL SURFACE AND/OR GROUND WATER MUST BE DIVERTED AROUND SEWAGE SYSTEM.

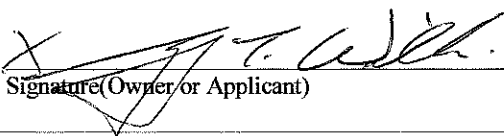
THERE MUST BE SUFFICIENT SPACE ON THE PROPERTY TO INSTALL ORIGINAL AND BACKUP CONVENTIONAL ONSITE SEWAGE SYSTEM.

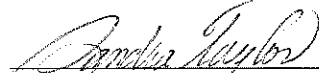
THE ENVIRONMENTAL HEALTH DEPARTMENT WILL BE CHECKING FOR THE NUMBER OF BEDROOMS AND THE WIRING FOR GARBAGE DISPOSALS IN NEW HOMES.

THIS PERMIT SHALL REMAIN VALID FOR NOT MORE THAN TWELVE (12) MONTHS FROM THE 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.

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 have read and will comply with the additional requirements printed above. I understand that final inspection is required and will notify the County Health Department upon completion of construction and before applying final cover.


 Signature (Owner or Applicant)


 ONLY VALID FOR CONSTRUCTION IF SIGNED
 PROPOSED DRAWING IS ATTACHED

RAHWY COUNTY BOARD OF REALTIE
 CLAYTON, GA 30525
 APPLICATION FOR CONSTRUCTION PERMIT
 AND INSPECTION FORM FOR ON-SITE
 SEWAGE MANAGEMENT SYSTEM

Permit Number: S-114-2001-00303
 Property Address: 1933 WORLEY CREEK RD
 LAKEMONT, GA 30552
 Owner's Name: GREG WILLIS

Builder/Company:
 Septic Installer: HOPFER, TRAVIS
 Lot Number: Subdivision:
 Latitude: Longitude:
 Gallons per Day:
 Type System:
 Garbage Disposal: No Field Layout:
 Water Table:
 Soil Type: TOXAWAY HAYWOOD

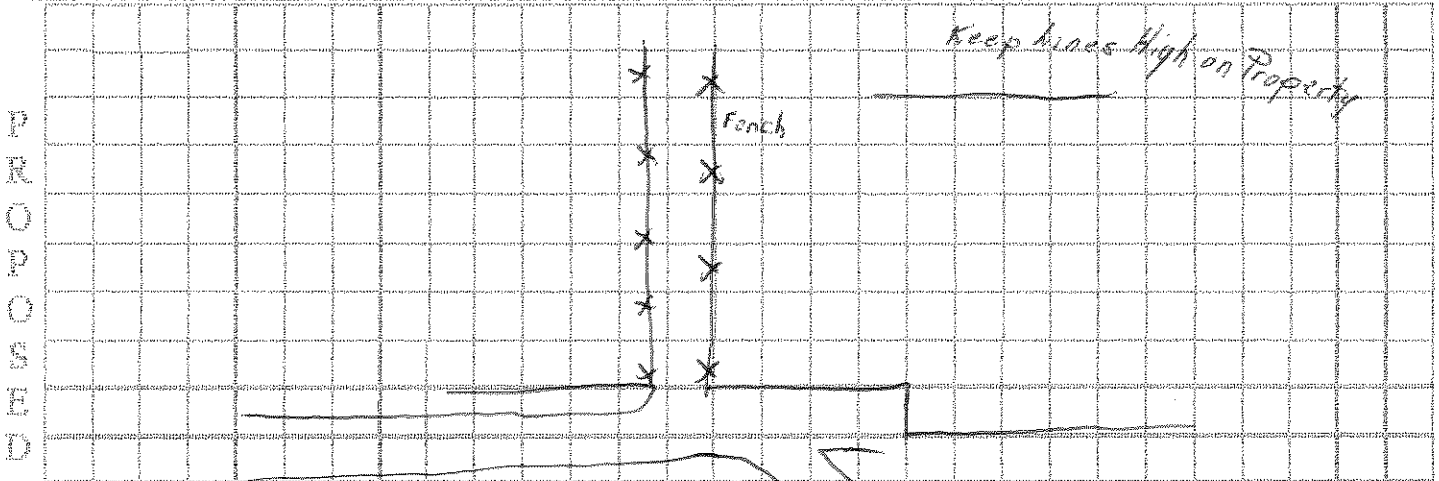
Facility Type: BARN
 Lot Size: 10.00
 Water Supply: INDIVIDUAL
 Flushing Level:
 Perc Rate: 40
 Grease Trap: Gals.
 Septic Tanks: B+B 1200 Gals
 Dosing Tanks: 1000 Gals.

Linear Ft: Square Ft: Trench Width: Trench Depth:
 43' 7 units 285 36 inches 36 inches

*need Both audible + visual alarms wired
 separate from pump -*

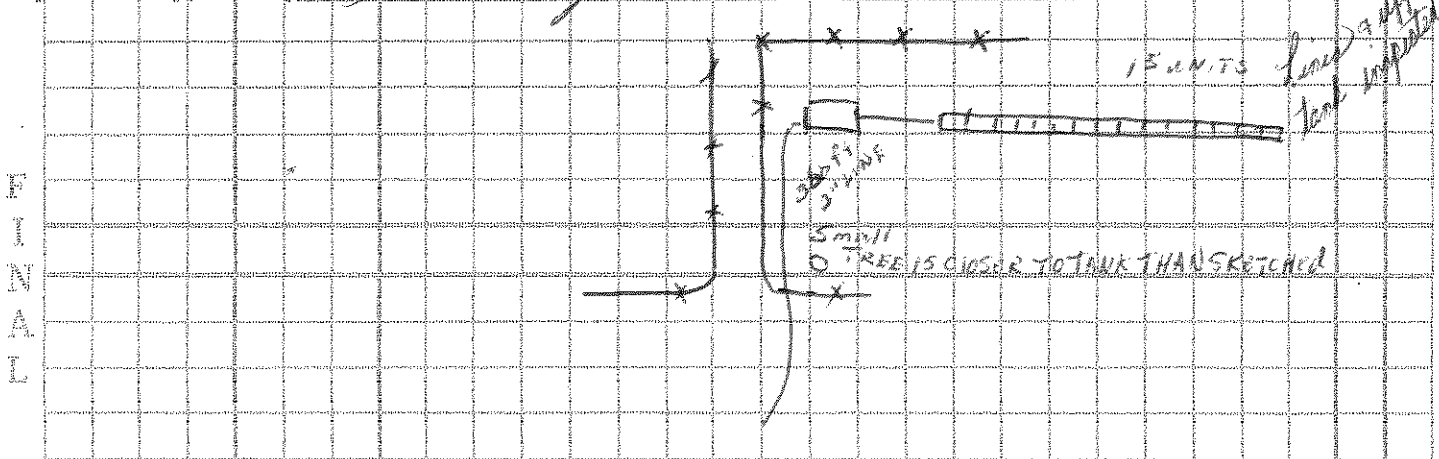
Directions:

OLD 441 S TO WORLEY CR RD - ON PAST STAMP CR RD - 1933 WORLEY CR RD



Proposed Site Approved By: *[Signature]*

Date: 11-2-01



Final Approval By: _____ Date: _____

Comments: