TENNESSEE DEPARTMENT OF HEALTH AND ENVIRONMENT CERTIFICATE OF COMPLETION OF SUBSURFACE SEWAGE DISPOSAL SYSTEM Issued to: Herman Driver

Over, Developer, Contractor Installer, Etc.

Location Cush Dollar Contractor Installer, Etc. Type of System: () . Standard () 2. Alternating () 6. Lagoon () 3. Chapter ___ () 7. Large Diameter Gravelless Pipe () 4. Low Pressure Pipe () 8. Other 1000 Septic Tank Estimated Absorption Rate __ Installed by: Young Construction property 100 5.T. 30 FRONT Drive 4-10-92 (date) Construction Approved By:

PH-3162 Rev. 7-90 WGA Original—File

Copy—Owner

TENNESSEE DEPARTMENT OF HEALTH AND ENVIRONMENT PERMIT FOR CONSTRUCTION OF SUBSURFACE SEWAGE DISPOSAL SYSTEM

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Installation: () 1. New Installation () 2. Repair to Existing System Establishment: () 1. Residential: # Bedrooms () 2. Other: ((specify) (Gal/Day_						Evaluation Based Upon: () 1. Soil typing by Soil Scientist () 2. Soil Percolation Test () 3. Environmental Specialist Estimated Absorption Rate: Minutes per inch								Permit Requirements Based Upon: (
						Conventional Systems: Type of System: (*) 1. Standard																			
This system shall consignations, with 24-30 wide and 24-30 All installers of subsurface.	face sewage disp	oosal syste	ms must	hold a vali	id annı	ual lice	ense fro						Healt	((h and l	uired:) 1. C) 2. F) 3. S) 4. O	Curtain low Di ewage other: _	Drain iversic Pump	on Valv	re fa						
Disposal Syste Department of	of this permit agems. If any part of Health and Env	ironment.	Any cutti	ered befor ing, filling	e being	g insperation	cted a	nd app e soil	oroved. conditi	it sha	ll be un the af	oreme	ed by tone	the reci	pient o	of the p	day n	at the	direction der this	n of ne	reann	ol of	ha	ige	
Signature of Recipilissued at SPARTA By WM SERVE ST						Tennesse V. Spee. Date This permit is valid for 3 years from date of issue.								. in WH/7E L-/0-92 (Date of Issue)								County			
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This is a permit to construct and is not intended to imply approval of any work proposed or completed on this lot.

ENC# 0010068 DATE 01/09/92 RACE SEX

HERMAN

WALLING ONE: 615-738-5842

. R 1

MEDICAID #:

ST: TN

MNETAL SERVICES
TER PROTECTION

PERMIT

_	Lulle
1.	LANDOWNER: Name <u>Jerman Driver</u> Name Jony young ORIGIANL OWNER: Name
	Address R. 1. Walling James Address R. 4 Sporter Jenni
	738-5842 after 4:00
	Please advise us where you may be reached between 8:00 a.m. and 4:30 p.m. Phone Number
2.	Is lot in a subdivision? YESNOX
18 L	Property is north of white Co. Coon hunters club 500 yels on
	cashdollor cave Rd. ceross the ward (west side) from the
	remains of the old log carbin, House site located behind
	the large Dozer pile.
3.	a. Size of lot 37 accers b. Number of bedrooms 3 c. Basement plumbing: Yes No X d. Water Supply: Public X Well Spring e. Installer forus found & Robert meets f. Is lot staked? Yes No Is house site staked? Yes No NOTE: if not, evaluation cannot be performed until this p.
	NOTE: if not, evaluation cannot be performed until this Department is notified of proper staking.
4.	Make a rough sketch on the back of this page showing property lines, well or spring location, planned house site, driveway, and utilities.
5.	ALL FEES ARE DUE IN ADVANCE AND ARE NON-REFUNDABLE AFTER INITIAL VISIT.
	SEPTIC SYSTEM PERMIT-\$100.00 up to 1000 gpd \$50.00 each additional 1000 gpd
6.	I certify the above information is true and correct to the best of my knowledge.
DAT	E: 1-9-92 SIGNATURE: Jones R. Gounny
REC	EIPT NUMBER: 1550

