CHATHAM COUNTY PUBLIC HEALTH DEPARTMENT DIVISION of ENVIRONMENTAL HEALTH

SEWAGE DISPOSAL OPERATIONS PERMIT

Owner: WILLIAM SPIEGEL	Date: 6-17-19			
911 Address: 2852 CHICKEN BRIDGE ROAD	Subdivision & Lot#: SPIEGEL'S HILLS LOT 2			
Residential: Non-Residential: Parcel Number 82613				
Maximum Number of Bedrooms: 3 Max GP				
Specific System Installed: INFILTRATOR QUICI	4			
This permit authorizes the owner to operate the sewage disposal system in accordance with the state and local rules. The contents shall be pumped whenever the solids level is found to be 1/3 of the liquid depth in any compartment; approximately every 3 to 5 years. In the event of a malfunction contact this office. This certifies that the system has been installed in compliance with applicable NC General Statues and Rules for Sewage Treatment and Disposal and all conditions of the Improvements Permit and Construction Authorization.				
TYPE III-B, IV, V, VI SYSTEMS REQUIRE ROUTIN	VISITS by the Chatham County Public Health Department and			
owners are required to pay an annual COUNTY MICH	URING FEE. Type IV V & VI systems are required to have			
VIAL OPERATION PERMIT HOLDERS ARE RESPO	in these systems at a frequency specified in RULE .1961, TABLE ONSIBLE FOR NOTIFYING SUBSEQUENT OWNERS OF			
OF ERATION PERIMIT REQUIREMENTS,				
Type System: I II III III III-B IV Installer <u>JIMMY STONE</u> Certification #2911	V VI REHS Shorter C) Boyer R.S.			
This map is not a certified survey & has not been reviewed by a local gover	nment agency for compliance with any applicable land development regulations.			
	1 20.53 1 23 63 2 25 670 3 27 7.9 1 28.14 20 1 23 8.6 3 27 7.9 4 13 8.6 3 20 43 × 19" 9'06			

CHECKLIST	===	INT/DATE
ST 613 1200 57B 106 CCHD 91 3	•	JB 617-19
PT		1
One Piece Two Piece	- ,	
Filter Palylok PL-le8		
Riser		
Drainfield 360'	•	
Gravel TCHP (IQ4W EZ1203H		-
LDP8 LDP10 LPP Other	_	
Pump NA	,	
Pump Demo		
Distribution device NA	•	
Alarm/Floats	•	
Circuits NA		
Cover	_	
Monitoring Fee	_	1
Water Sumly	٠	



Construction Authorization for Wastewater Systems CHATHAM COUNTY PUBLIC HEALTH DEPARTMENT DIVISION OF ENVIRONMENTAL HEALTH

80 EAST ST., P.O. BOX 130 - PITTSBORO, NC 27312-0130 PHONE 919-542-8208 / FAX 919-542-8288

www.chathamnc.org/environmentalhealth

Expiration Date: January 31, 2019

Permit Number: PREH201400050

New

Owner: SPIEGEL WILLIAM DJR

911 Address: 2852 CHICKEN BRIDGE RD

Parcel Number: 82613 Subdivision Name: Spiegel's Hills Subdivision Lot: 2

- This permit authorizes its permit holder to install the sewage disposal system within five years of the issue date on the Improvement Permit.
- This permit is non-transferable.
- The installer must be registered with NCOWCICB.
- This authorization is required prior to the issuance of a building permit.
- Before an Operations Permit is issued, all required inspections and conditions of the permit must be completed and verified by this department and payment of applicable fees must be received.

Instructions and Conditions:

- X Design capacity: Number of Bedrooms: 3 or 360 GPD.
- x System Type: II
- x Nitrification Line: Length 480 ft; Width 3 ft; Depth 18 in

Approximate contour in the the system area is shown on site plan. The installer must flag the system prior to installation to ensure proper grade.

- Approximate system component locations shown on site plan; contractor must verify component locations prior to installation to assure proper fall from house to septic tank and from septic tank to approved system area.
- x Approved site plan attached.

Site plan per Improvement Permit approved.

System Type II.

System types IIIb, IV, V, and VI require the payment of annual onsite wastewater monitoring fees to the Chatham County Public Health Department.

Payment of the first annual fee is required prior to the issuance of the Operation Permit.

Special Conditions: 1000 gallon septic tank with riser and filter, may use accepted 360 ft x 3 ft x 18 in

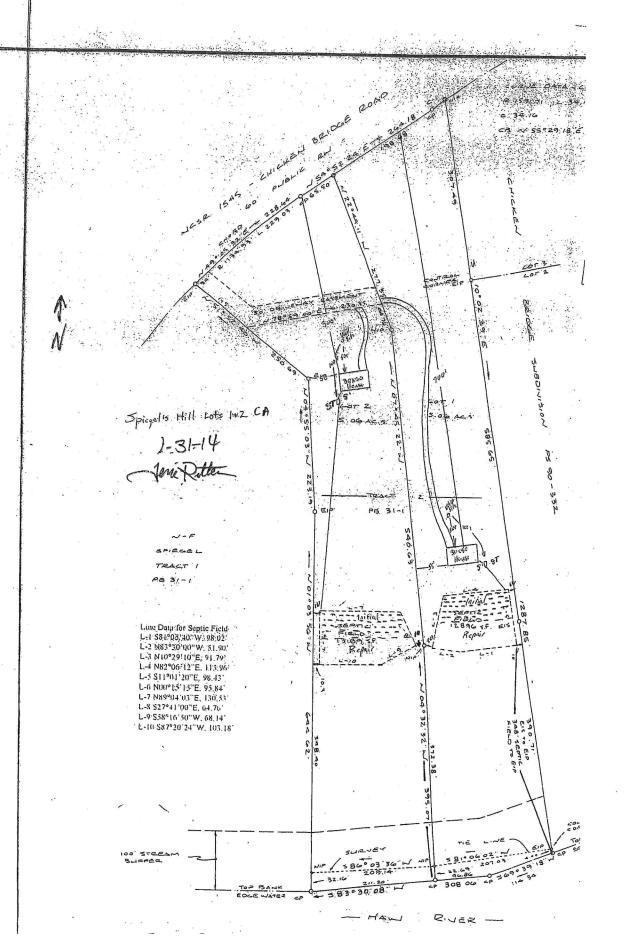
For new installations, the Operation Permit is required to be recorded at the Chatham County Register of Deeds Office prior to Environmental Health notifying Chatham County Building Inspections Department of Septic System Approval.

This Construction Authorization is subject to revocation if the site plan, plat or the intended use changes. This Construction Authorization is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal condtions on this permit.

Permit issued by Terri Ritter

Registered Environmental Health Specialist

Date: Jan 31, 14

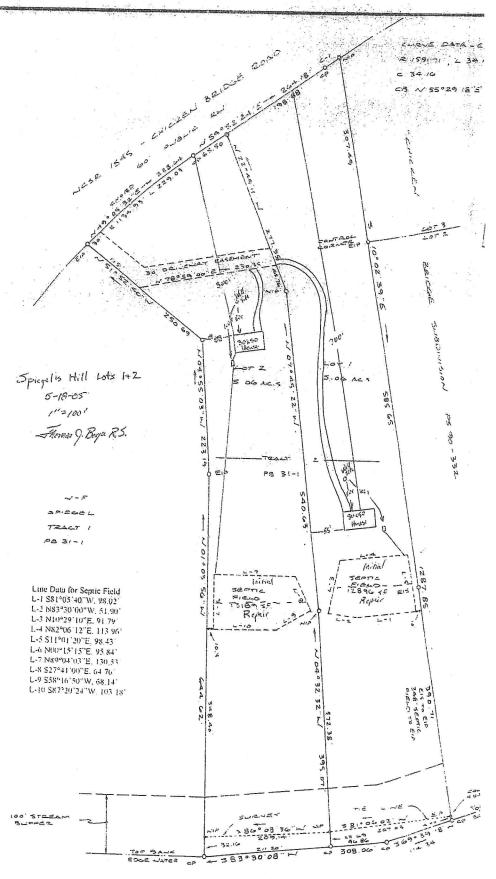


Chatham County Public Health Department Environmental Health Division 80 East Street, P.O. Box 130 Pittsboro, NC 27312 (919) 542-8208 FAX (919) 542-8288

File Name	
911 Address	¥
Parcel Number	

SEWAGE DISPOSAL CONSTRUCTION AUTHORIZATION

DE WASE WEST COMO FROM FOR HOME AND FINITERIAL FOR
EXPIRATION DATE 9-5-12
New W Repair Expansion
Owner Bill Spiral
Directions To Property 2852 Chicky Beidge Rd
 This permit authorizes its permit holder to install the sewage disposal system within five years of the issue date on the Improvement Permit.
 This permit is non-transferable. The installer must be registered with the Chatham County Environmental Health Division.
• This authorization is required prior to the issuance of a building permit.
 Before an Operations Permit is issued, all required inspections and conditions of the permit must be completed and verified by this department and payment of applicable fees must be received.
Instructions and Conditions
Design capacity: Number of bedrooms 3 or GPD 360.
Plans, if required were approved by Approximate contour in system area is shown on site plan. The installer must flag the system
Approximate contour in system area is shown on site plan. The installer must flag the system
prior to installation to ensure proper grade. Approximate system component locations shown on site plan, contractor must verify
component locations prior to installation to assure proper fall from house to septic tank and
from septic tank to approved system area.
Approved site plan attached.
Site plan per Improvement Permit approved.
System Type* . System types III (b). IV, V and VI require the payment of annual onsite
wastewater monitoring fees to the Chatham County Public Health Department. Payment of the first
annual fee is required prior to issuance of the Operation Permit.
480' K 3' K 18" COADENTIONAL 360' K 3' K 18" Accepted
This Construction Authorization is subject to revocation if the site plan, plat or the intended use changes. This Construction Authorization is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal conditions on this permit.
Permit issued by Montal Day R. S. Date 9-5-12 Environmental Health Specialist
I understand that the system type specified is different from the type specified on the application and accept the specifications of this permit.
Signature Date
Owner/Legal Representative Date Owner/Legal Representative



911 Address

Spirales Hill

CHATHAM COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH DIVISION

Date ______ EHS_____ System Type ______

OFFICE USE ONLY

Permit No.

Improvement Permit for Wastewater Systems ARTICLE II-CHAPTER 130A OF THE NC GENERAL STATUTES

NEW I REPAIR I EXPANSION I	
An Improvement Permit is issued to Bill Spiegel	_for
a 5.00 acre site located tot 2. Spingeles Hill	
in Chatham County. It is specifically issued for the following facility:	
Facility: Residential () Non-Residential ()	
No. Bedrooms 3 No. Residents/Employees & Max	
Type Wastewater: Residential (x) Commercial ()	
Initial System Type: $I()$ $II(\mathcal{E})$ $III()$ $IV()$ $V()$	
Description	
Type System: Shallow Conventional (½) LPP ()	
Other	
Design Flow <i>360</i> EGPD Application Rate <i>, 25</i> GPD/ft ²	
Size Tank(s) w/Risers and Effluent Filter ST / ODO Gal PT Gal	
Nitrification Line (Length/Width/Max Depth) 490×3×48"	
(On contour in approved septic area; sch. 40 PVC required over step-downs)	
Repair System Type: I()II(_大) III() IV()V() VI()	
Description At Brade Conventional	
Special Conditions	
A plat with site plan showing specific location of the facility, the site for the proposed wastewater system, existing buildings, property lines, water supplies, surface waters, the conditions for any site modifications; and any other information required by the department must be attached to be valid.	
This permit is valid [X] without expiration [* for five years but is subject to revocation if the site is altered, soil disturbed, set-backs violated, or the plans of intended use are changed. The Improvement Permit shall not be affected by change in ownership.	S
THIS IS NOT AUTHORIZATION TO INSTALL. An authorization for Wastewater Construction must be obtained from this department before installation.	
Issued by <u>Fines (). Boya R.S.</u> Environmental Health Specialist	
N.C. Registration Number <u>7353</u>	
N.C. Registration Number 1353	