



TENNESSEE DEPARTMENT OF ENVIRONMENT AND CONSERVATION  
DIVISION OF GROUND WATER PROTECTION

PERMIT FOR CONSTRUCTION OF SUBSURFACE SEWAGE DISPOSAL SYSTEM

Issued to: Johnson, Michael A  
Owner, Developer, Contractor, Installer, Etc.  
Location: 340? Crossvalley Rd  
Installation:  
 1. New Installation  
 2. Repair to Existing System  
Establishment:  
 1. Residential: # Bedrooms 3 (three)  
 2. Other: \_\_\_\_\_ (specify)  
Gal/Day \_\_\_\_\_

Evaluation Based Upon:  
 1. Soil typing by Soil Scientist  
 a. General  
 b. High Intensity  
 c. Extra High Intensity  
 2. Soil Percolation Test  
 3. Environmental Specialist  
Estimated Absorption Rate: 60 MPI

Type of System:  
 1. Conventional  
 2. Low Pressure Pipe  
 3. Mound  
 4. Lagoon  
 5. Large Diameter Graveless Pipe  
 a. Sand backfill required  
 6. Other

Approval based upon:  
Statute No. T.C.A. 68-221-403  
 (c) Percolation test  
 (d) Grandfather clause. Current standards except those specified  
 (f) 12" (karst) and 6" (non-karst) buffer required  
 (i) 9" buffer required (24"-36" total soil depth)  
 (k) Grandfather clause — meets June 30, 1990 standards (repair only)  
 Other \_\_\_\_\_

This system shall consist of a two compartment septic tank holding 900+ gallons, with 330 linear feet in \_\_\_\_\_ trenches, 36 inches wide and 24-36 inches deep. (Depth of gravel: 12 inches)

Also required:  
 1. Soil Improvement Practice (SIP)  
 2. Flow Diversion Valve  
 3. Sewage Pump  
 4. Other: \_\_\_\_\_

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

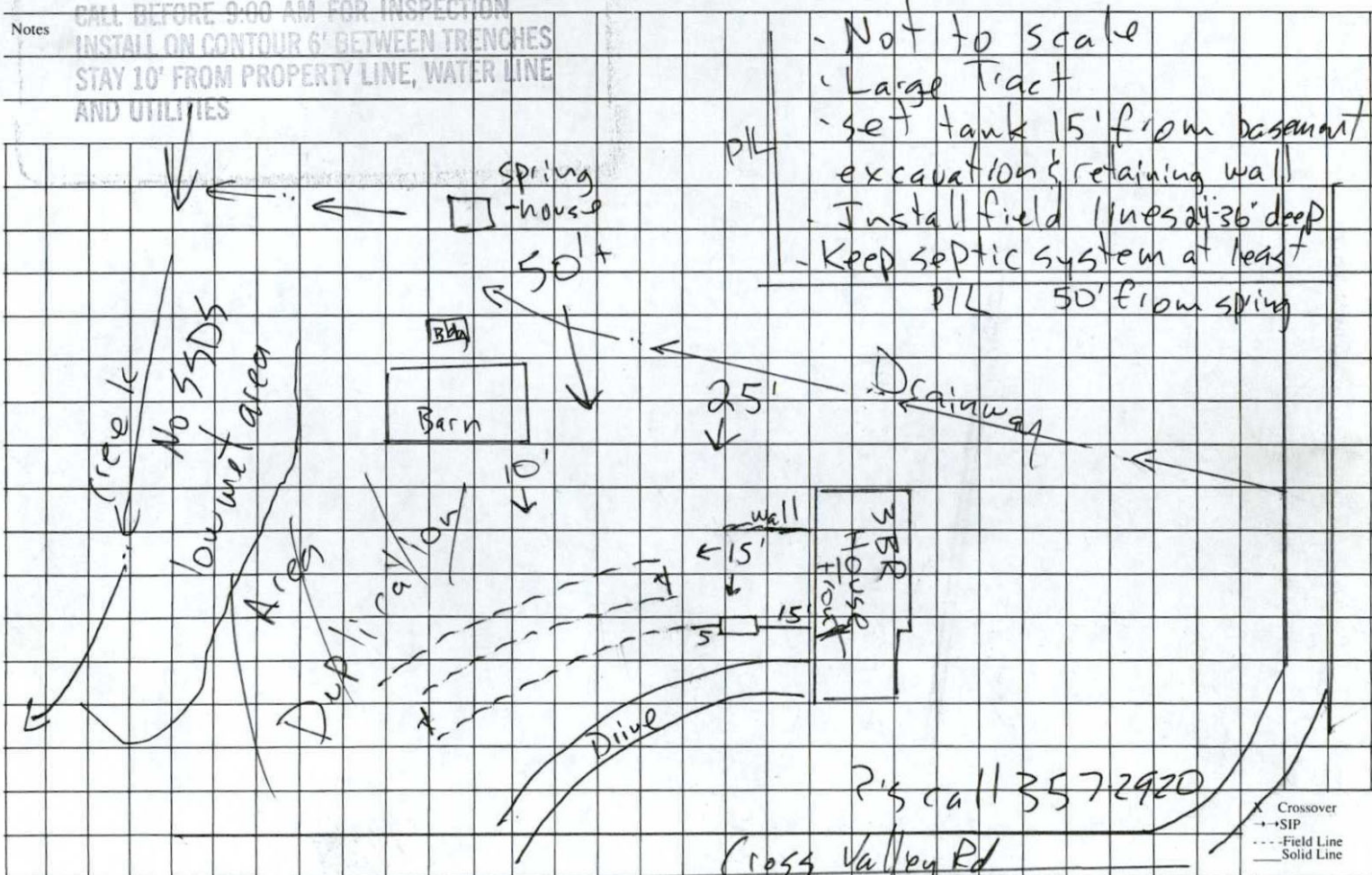
The recipient of this permit agrees to construct or have constructed the above described system in accordance with T.C.A. 68-221-401 et. seq. and The Regulations To Govern Subsurface Sewage Disposal Systems. If any part of the system is covered before being inspected and approved, it shall be uncovered 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.

X Michael A Johnson Date X 3-15-05  
(Signature of Recipient)

Issued at Church Hill Tennessee, in Hawkins County

By Dave Curbish ES3 Date 3-15-05  
(Name and Title) (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.





TENNESSEE DEPARTMENT OF ENVIRONMENT AND CONSERVATION  
APPLICATION FOR GROUND WATER PROTECTION SERVICES

1. SERVICE REQUESTED: (check service)	APPLICANT COMPLETE QUESTIONS:	FEE DUE	PTBMIS CODES V689 Code Supp/Code	
<input checked="" type="checkbox"/> Septic System Construction Permit		\$ <u>200.00</u>	78064	Yes
<input checked="" type="checkbox"/> Dwelling .....	2, 3, 4, 7, 8, 9	\$ _____	78064	Yes
Commercial: gpd .....	2, 3, 4, 7, 8, 9	\$ _____	78064	Yes
System Modification .....	2, 3, 4, 7, 8, 9	\$ _____	78032	
Repair .....	2, 3, 4, 7, 8, 9	\$ _____	78030	
Inspection Letter .....	2, 3, 5, 7, 8, 9	\$ _____	78036	Yes
Water Sample			78038	Yes
Total Coliform .....	2, 3, 6, 7, 8, 9	\$ _____	78068	
Fecal Coliform .....	2, 3, 6, 7, 8, 9	\$ _____	78090	
Alternative System Permit* .....		\$ _____	78090	
Large Conventional System Plan Review* .....		\$ _____	78072	
Large Alternative System Plan Review* .....		\$ _____	78084	
Experimental System Plan Review* .....		\$ _____		Yes
Subdivision Evaluation: Lots: _____*		\$ _____		Yes
Soil Mapping: Type _____ Acres _____*		\$ _____	78026	
Installer Permit: Type(s) _____*		\$ _____	78028	
Pumper Permit* .....		\$ _____	78029	
Plat Approval — Individual Lot .....		\$ _____	78031	
Domestic Septage Disposal Site Permit .....		\$ _____		

\*Applicant may review these service requests with Environmental Specialist prior to processing application.

2. **LANDOWNER:** Names: MICHAEL A JOHNSON **APPLICANT** Name: \_\_\_\_\_ **ORIGINAL OWNER** Name: HOWER JOHNSON  
Address: \_\_\_\_\_ Address: \_\_\_\_\_

Day Phone: 423-534-3479 Day Phone: \_\_\_\_\_

3. **LOCATION OF LOT OR SITE:** a) In a subdivision? NO b) Name: CROSSVALLEY RD Lot # \_\_\_\_\_  
b) Non-Subdivision \_\_\_\_\_ Give specific directions and address to the lot or site: \_\_\_\_\_

4. **FOR SSDS PERMIT ONLY:** a) Size of lot 5.5 ACRES b) Number of Bedrooms 3  
c) How many occupants? 4 d) Excavated Basement? Yes  No \_\_\_\_\_  
e) Basement Plumbing Fixtures? Yes \_\_\_\_\_ No   
f) Amount of water used monthly (gallons) ?  
g) Water Supply: Public \_\_\_\_\_ Well \_\_\_\_\_ Spring   
h) Is the lot staked? YES If not, date it will be staked: \_\_\_\_\_  
Is the house staked? YES If not, date it will be staked: \_\_\_\_\_  
i) Installer, if known: WILLARD HAYES

5. **FOR INSPECTION LETTER ONLY:** Will pick up \_\_\_\_\_ Please mail \_\_\_\_\_  
a) Age of house \_\_\_\_\_ b) Is house vacant? \_\_\_\_\_ How long? \_\_\_\_\_  
c) Original sewage system inspected \_\_\_\_\_  
d) Date of previous repairs \_\_\_\_\_ Inspected \_\_\_\_\_  
e) Is waste water "backing up" into plumbing fixtures? \_\_\_\_\_ Surfacing on the ground? \_\_\_\_\_  
f) All waste water including washing machines routed into septic tank \_\_\_\_\_

6. **FOR WATER SAMPLE ONLY:** a) Source of Supply: Spring \_\_\_\_\_ Well \_\_\_\_\_  
b) Is there an outside faucet? \_\_\_\_\_ c) Is the source chlorinated? \_\_\_\_\_  
d) For Wells: Is the casing 6" above the ground? \_\_\_\_\_ Is a sanitary seal on the casing? \_\_\_\_\_

7. MAKE A ROUGH SKETCH ON BACK OF THIS **WHITE** PAGE SHOWING DIRECTIONS TO PROPERTY, PROPERTY LINES, HOUSE SITE, WELL LOCATION, SPRING LOCATION, PLANNED DRIVEWAY AND UTILITIES.

8. ALL FEES DUE IN ADVANCE AND ARE NON-REFUNDABLE (except upon appeal). See Fee Schedule on reverse. Make check payable to: **TREASURER, STATE OF TENNESSEE**

9. I certify that the above information is true and correct to the best of my knowledge, and that I have been authorized by the above named landowner to submit this Application for Environmental Services to the Division of Ground Water Protection.

DATE: 3/14/05 SIGNATURE: Michael A Johnson AMOUNT PAID: \$ 200.00 RECEIPT NUMBER 60622

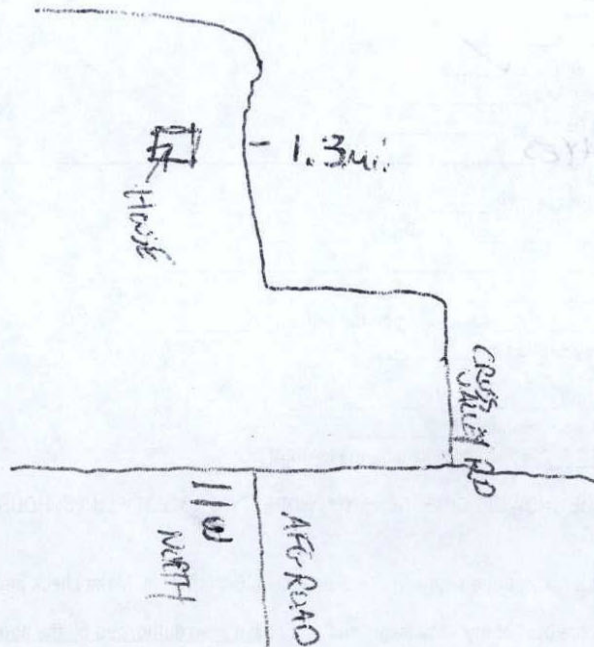
White: File Canary: Owner

## FEE SCHEDULE

**PTBMIS  
SUPP/CODE**

Evaluation for Conventional, LDGP or Chamber Septic System Permit	\$200.00 up to 1000 gpd	
	\$100.00 for each additional 1000 gpd or portion thereof	78066
Repair	\$None	
Inspection Letter	\$200.00	
Subdivision Evaluation	\$ 40.00 per lot	
Water Samples:		
Total Coliform	\$ 50.00	78036P
Fecal Coliform	\$ 100.00	78036P
Soil Mapping:		
General Intensity	\$ 80.00 per acre — \$ 80.00 minimum	78078
High Intensity	\$130.00 per acre — \$130.00 minimum	78040
Extra High Intensity (Minimum is for each separate acre or part of acre to be mapped)	\$200.00 per acre — \$200.00 minimum	78042
Alternative System Application Processing	\$300.00 up to 1000 gpd	78071
	\$150.00 for each additional 1000 gpm or portion thereof	78070
Large Conventional or Large Alternative Plan Review	\$600.00 per proposed system	
Experimental System Application Processing	\$500.00	
Pumper Permit	\$200.00	
Installer Permit	\$200.00 for conventional, LDGP and chamber \$100.00 for each alternative system	78080
Plat Approval — Individual Lots	\$ 40.00 per lot	78029
Domestic Septage Disposal Site Permit	\$400.00	78031

### SKETCH



**Official Use:**

File Search

Absorption Rate \_\_\_\_\_ At Depth \_\_\_\_\_

Percolation Rate \_\_\_\_\_ At Depth \_\_\_\_\_

Other Requirements