

PICKENS COUNTY INDIVIDUAL SEWAGE DISPOSAL SYSTEM PERMIT APPLICATION AND INSPECTION REPORT

CHARLES W. McKINNEY

Permit # _____ Date Permit Issued 9/4/85 Date System Inspected 10/3/85
 Receipt # 686 Property Owner & Address Charles W. McKinney
3107 / 3108 Cripple Creek St.
Bent Tree
 Property Location: _____ Telephone _____
 Sewage Contractor David Balthasar Sew

I hereby apply for a permit to install or construct an individual sewage disposal system and agree that the system will be installed to conform to the requirements of the former Georgia Department of Public Health, Chapter 270-5-25.
 I understand that final inspection is required and hereby promise to notify the Pickens County Health Department upon its completion and before applying final cover.
 I further realize and understand that neither this permit nor the final inspection in any way guarantees the proper operations of the sewage system nor in any way confers any guarantee or warranty of any kind.

[Signature]
 Owner or applicant's signature

9/4/85
 Date

1. Type water supply:
 a. individual b. community c. public
2. a. New system b. Repair c. Existing
3. Perc. rate 30
4. Type Facility Res
5. No. of bedrooms or gallons _____
6. Subdivision ☐ Yes ☐ No
7. Lot size _____
8. Building line _____
9. Septic tank capacity min. 1000
10. As installed _____
11. Dosing tank capacity _____

12. Distance S.T. from well _____
13. Min. amount of field line:
 Ft. sq. 750 Linear Ft. 250
14. Field line as installed:
 Ft. sq. _____ Linear Ft. _____
15. Width of trench 36"
16. Distance between trenches 10'
17. Trench dept. avg. 36"
18. Distance from foundation 10'
19. Nearest property line _____
 front, rear, side
20. Distance from well _____

Site: Approved, Approved Conditionally, Rejected
 System: Approved, Approved Conditionally, Rejected

Inspector: [Signature]
 Inspector: [Signature]

REMARKS:

