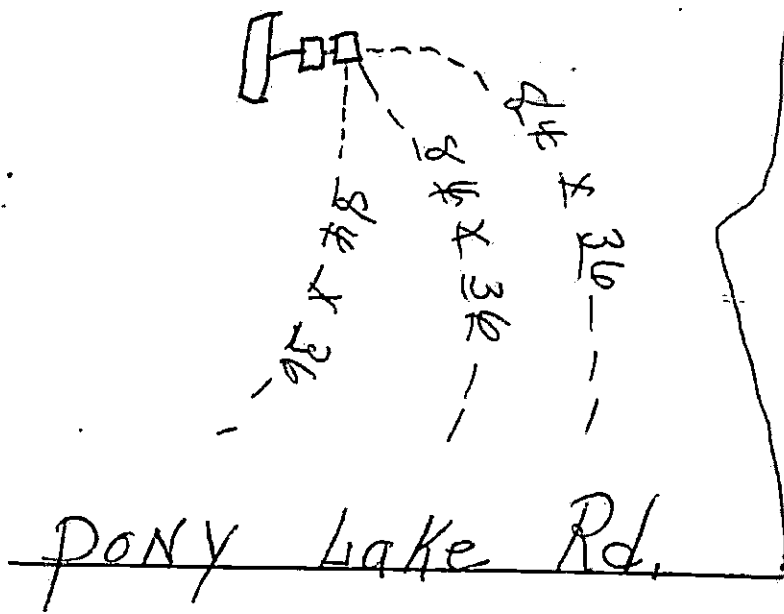


AS BUILT PLOT PLAN

12/22/86 letter
to Building Official



DEPARTMENT OF PUBLIC HEALTH - INDIVIDUAL SEWAGE RECORD

Mobel Home
Type of Establishment

Hall
County

Go Route #60 To Pony Lake Rd. 1/2 mile on left
Location (Address)

Doyle Robinson
Owner's Name

Johnson St. Gainesville
Owner's Address

Construction Permit Number 9040

Water Supply: City _____ Other

Name of Subdivision Pony Lake Rd

Lot Number None Block _____

Tank Size: Length 8 Feet Width 4 Feet Liquid Depth 5 Feet

Tank Material Cement + Wire Tank Capacity 1000

Tile Field:
Distance From: Foundation _____ ft.; Well _____ ft.; Nearest lot line _____ feet.

Total length 252 Feet Number of Lines 3

Length each line 84 Ft. Trench width 36 in. Depth of tile _____

Filter Material: Gravel NO # 5 Broken Stone _____ Depth _____

CONTRACTOR'S SIGNATURE Harace Lee ADDRESS Rte 4 Gainesville

DATE COMPLETED April 24, 71

Georgia Department of Public Health
INDIVIDUAL SEWAGE DISPOSAL SYSTEM INSPECTION REPORT

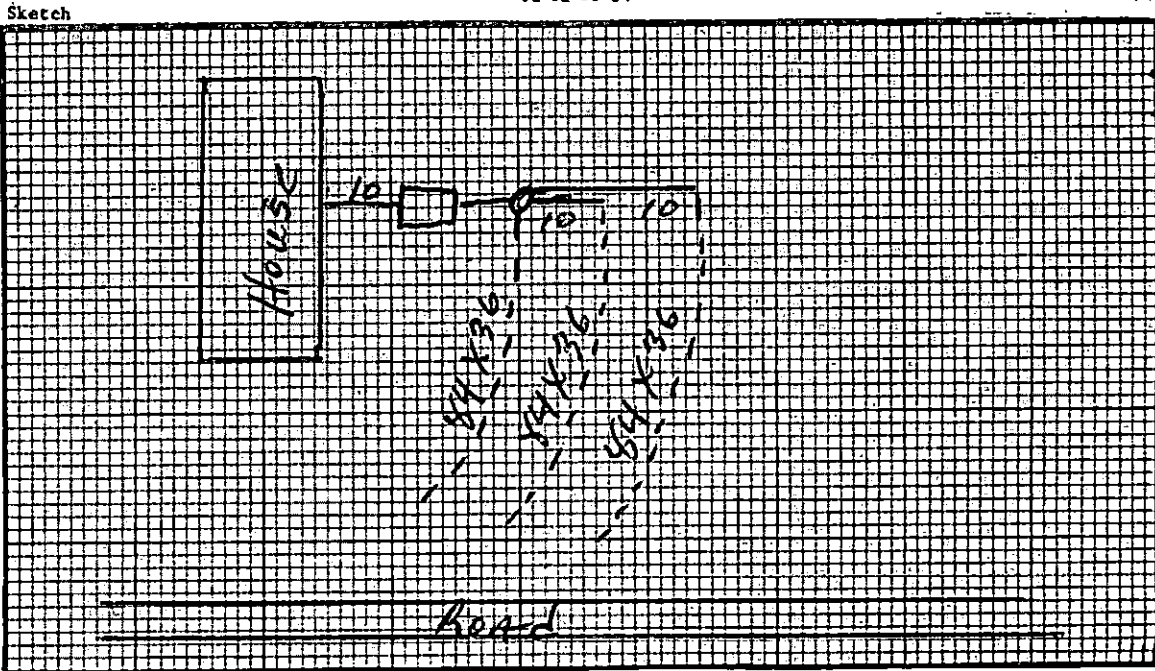
County Code	Construction Permit	Case Number (PHA, VA, etc.)	Health Dist.	Day	Month	Year
069	9040	9 10 11 12 13 14 15 16 17 18 19 20	02	28	06	91
2 3 4	5 6 7 8		21 22	23 24	25 26	27 28

Property Location <div style="font-size: 1.5em; font-family: cursive;">Pony Lake Rd.</div>	Property Owner <div style="font-size: 1.2em; font-family: cursive;">Doyle Robinson</div> Sewerage Disposal Contractor <div style="font-size: 1.2em; font-family: cursive;">Horace Gee</div>	County <div style="font-size: 1.5em; font-family: cursive;">Hall</div>
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ALL ITEMS: Blank = Not Applicable; 0 = Unknown

*ITEMS: 1 = Yes; 2 = No

SECTION A - GENERAL	SECTION D - PRIMARY TREATMENT	SECTION B - FACILITY
1. Type Water Supply: (1) Public, (2) Community, (3) Indiv. <input checked="" type="checkbox"/> 3	1. Sewage Disposal Method: (1) Septic Tank, (2) Construction Privy, (3) Pit Privy, (4) Other <input checked="" type="checkbox"/> 1	b. Total Linear Feet <input type="text" value="02572"/>
2. Financial Assistance: (1) PHA, (2) VA, (3) Farmers Home, (4) Conventional, (5) Other <input type="checkbox"/> 29	2. Septic Tank Capacity (gallons): <input type="text" value="1000"/>	c. Length each Trench (feet) <input type="text" value="01814"/>
3. House Structure: (1) New, (2) Existing < 1 year, (3) Existing > 1 year <input type="checkbox"/> 30	3. Unit 1 Tank/Compartment Capacity: <input type="text" value="45 46 47 48"/>	d. Width of Trenches (Inches) <input type="text" value="36"/>
4. Sewage Disposal Installation: (1) New, (2) Repair to existing sys. <input checked="" type="checkbox"/> 31	4. Septic Tank Inside Length (feet): <input type="text" value="01845"/>	e. Number of Trenches <input type="text" value="03"/>
5. If Repair of Existing System - Years System Installed: (1) < 1 year, (2) 1 - 2, (3) 2 - 3, (4) 3 - 5, (5) 5 - 10, (6) > 10 <input type="checkbox"/> 32	5. Septic Tank Inside Width (feet): <input type="text" value="0140"/>	f. Distance between Trenches: <input type="text" value="10"/>
6. Percolation Rate Min./In.: <input type="text" value="30"/>	6. Septic Tank Liquid Depth (feet): <input type="text" value="40"/>	g. Average Trench Depth (Inches) <input type="text" value="40"/>
7. *Is Property Part of a Subdivision: <input checked="" type="checkbox"/> 2	7. Septic Tank Material: (1) Precast concrete, (2) Poured in place, (3) Other <input checked="" type="checkbox"/> 1	h. *Aggregate Proper Size <input type="checkbox"/> 1
SECTION B - FACILITY	8. Dosing Tank Capacity (gallons): <input type="text" value="53"/>	i. *Aggregate Proper Depth <input type="checkbox"/> 1
1. **Type Facility: See Code Below <input type="checkbox"/> 01	9. Grease Trap Capacity (gallons): <input type="text" value="54 55 56"/>	j. Distance from Building Foundation <input type="text" value="020"/>
2. Water Usage Determined by: (1) No. Bedrooms, (2) No. Gallons <input checked="" type="checkbox"/> 1	10. Distance Septic Tank from Well: <input type="text" value="57 58 59"/>	k. Nearest Property Line: (1) Front, (2) Rear, (3) R. Side, (4) L. Side <input type="checkbox"/> 1
3. Number Bedrooms or Gallons: <input type="text" value="01002"/>	SECTION E - SECONDARY TREATMENT	l. Distance Nearest Property Line <input type="text" value="010"/>
SECTION C - LOT SIZE	1. Field Layout Method: (1) Distribution Box, (2) Level Field, (3) Serial <input checked="" type="checkbox"/> 1	m. Distance Privy or Nitrification Field from Well <input type="text" value=""/>
1. Lot Depth (Average): <input type="text" value="2 Acre"/>	2. Nitrification Field: <input type="text" value="60"/>	SECTION F - HEALTH AGENCY TIME
2. Lot Width (Average): <input type="text" value=""/>	a. Total Square Feet <input type="text" value="0756"/>	1. Total Inclusive Time (min.): <input type="text" value="090"/>
3. Building Line (Feet): <input type="text" value=""/>		SECTION G - SYSTEM APPROVED
		1. *Yes <input type="checkbox"/> 1
		2. No <input type="checkbox"/> 1



1. **Type Facility
- (1) Residence
 - (2) Apartment
 - (3) Institution
 - (4) Service Station
 - (5) Restaurant
 - (6) Church
 - (7) Tourist Accommodation
 - (8) Launderette
 - (9) Mobile Home Park
 - (10) Other (Specify) _____

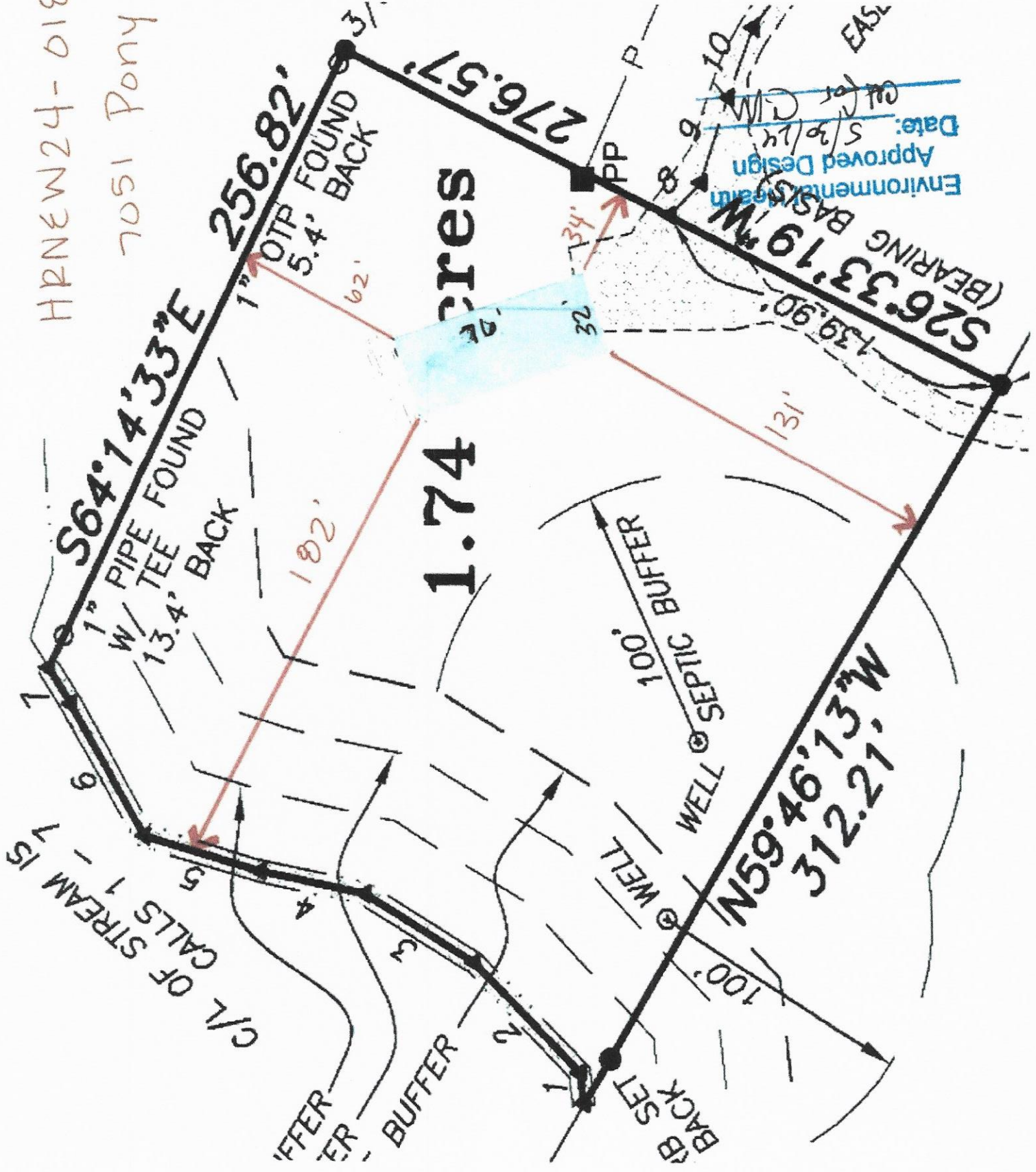
Contractor
Remarks: Draw 179

Inspected By: <u>George Fraser</u>	Title: <u>Env. Tech.</u>	Health Agency: <u>6-27-91 Hall Co. H/D.</u>
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**Georgia Department of Public Health
APPLICATION FOR CONSTRUCTION PERMIT AND SITE APPROVAL
FOR INDIVIDUAL SEWAGE DISPOSAL SYSTEM**

Subdivision, Street or Road <i>Route 60 - PONY Lake Rd.</i>		Health District <i>2</i>	County <i>HALL</i>
Property Location (Address, Block, Lot, Directions to Property) <i>Go Route #60 TO PONY Lake Rd. Pony's LAKE Road go approx. 1/2 mile ON left</i>			
I hereby apply for a construction 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 rules of the Georgia Department of Public Health, Chapter 270-5-25. I understand that final inspection is required and will notify the local or State Health Department upon completion of construction and before applying final cover.			
Signature (Owner or Applicant) <i>Horace Gee</i>		Date <i>4-24-71</i>	Phone No.
Property Owner's Name <i>DOYLE ROBINSON</i>		Phone No.	
Owner's Address <i>Johnson Street Gainesville</i>			
Permit Applicant's Name <i>Horace Gee</i>		Phone No.	
Applicant's Address <i>Route 4 Gainesville GA</i>			
Financial Assistance <input type="checkbox"/> FHA, <input type="checkbox"/> VA, <input type="checkbox"/> Farmers Home, <input checked="" type="checkbox"/> Conventional, Case Number <i>3</i>			
Type Facility (Residence, Church, Motel, Restaurant, Etc.) <i>Mobile Home</i>		No. of Bedrooms or No. of Gallons Per Day <i>2 Bd</i>	
Water Supply <input type="checkbox"/> Public, <input type="checkbox"/> Community, <input checked="" type="checkbox"/> Individual		Located Required Distances From Possible Pollution Source <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No	
Lot Size Front _____ Ft., Rear _____ Ft., Right Side _____ Ft., Left Side _____ Ft., Square Ft./Acre <i>2 acrs</i>			
House Design <input checked="" type="checkbox"/> Ground Level, <input type="checkbox"/> Split Level, <input type="checkbox"/> With Basement		Level of Plumbing Outlet <input checked="" type="checkbox"/> Ground Level, <input type="checkbox"/> Split Level, <input type="checkbox"/> Basement	
Soil Conditions (Nitrification Field) <i>C/A</i> Percolation Rate _____ Min./in.; Water Table Depth _____ Feet; Soil Type (Rock, Etc.) _____			
Sewage Disposal <input checked="" type="checkbox"/> Septic Tank, <input type="checkbox"/> Construction Privy, <input type="checkbox"/> Pit Privy		Total Capacity Septic Tank <i>1000</i> Gals.; Dosing Tank _____ Gals.; Grease Trap _____ Gals.	
Field Layout Method <input checked="" type="checkbox"/> Distribution Box, <input type="checkbox"/> Level Field, <input type="checkbox"/> Serial Distribution		Nitrification Field Area Total Sq. Ft. <i>756</i> ; Total Linear Ft. <i>252</i> ; Trench Width in <i>36</i>	
If Distribution Box is Used No. of Lines <i>3</i> ; Length Each Line, Ft. <i>84</i>			
Site Approved <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Special Conditions (Explain) <i>AR-10-1226 WILL CALL</i>			
PERMIT			
A Permit is hereby granted to install or construct the individual sewage disposal system described above. This Permit is not valid unless properly signed below, and expires twelve (12) months from date of issue.			
Construction Permit Number <i>9040</i>		Date of Issue <i>23 Apr 71 (EE)</i>	
Approved by (Health Department Representative)		Title	

HRNEW24-0183
7051 Pony L



Environmental Staff
Approved Design
Date: 5/30/14
G.M.

EAS

WELL @ SEPTIC TANK
100' BUFFER

WELL @ WELL
100' BUFFER

C/L OF STREAM 15
CALLS 1 - 7

1
2
3
4
5
6
7