



**Georgia Department of Public Health
Construction Permit and Site Approval
For On-Site Sewage Management System**

| | | | | | |
|---|---|---|--|--|---------------------------------|
| COUNTY: Hall | SUBDIVISION: BERTIE S KEIGH | LOT NUMBER: 44-46 | BLOCK: | | |
| PROPERTY ADDRESS: 5 RAY ST GAINESVILLE, GA 30504 | | DIRECTIONS: ADD-ON MOD PERMIT TO ACCOMMODATE A NEW 1 BDRM GUEST HOUSE. SEE PERMIT OSC-069-7589. NEW HOME TO CONNECT TO EXISTING SYSTEM, WHICH CAN ACCOMODATE 3 BDRMS TOTAL. 2 BDRM EXISTING HOME + 1 BDRM NEW HOME = 3 BDRMS. | | | |
| I hereby receive this construction permit to install an On-Site Sewage Management 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 511-3-1 and this permit. By my signature, I understand that final inspection is required and will notify the County Health Department upon completion of construction and before applying final cover material to the system. | | | | | |
| PROPERTY OWNER'S/AUTHORIZED AGENT'S SIGNATURE: | | DATE COMPLETED APPLICATION RECEIVED: 05/30/2025 | | | |
| PROPERTY OWNER'S NAME: ANDRES HERNANDEZ SIERRA | PHONE NUMBER: [REDACTED] | PROPERTY OWNER'S ADDRESS: 5 RAY ST GAINESVILLE, GA 30504 | | | |
| AUTHORIZED AGENT'S NAME: CHRIS CORADO | PHONE NUMBER: [REDACTED] | RELATIONSHIP TO OWNER: FRIEND | | | |
| Section A - General Information | | | | | |
| CAN REQUIRED SETBACKS BE MET: YES | | TYPE OF STRUCTURE: Single-Family Residence | SOIL SERIES: | | |
| DRINKING WATER SUPPLY: Public | WELL ON THE SITE: YES | WATER USAGE BY: Bedroom Numbers | PERCOLATION RATE / HYDRAULIC LOADING RATE: | | |
| SYSTEM TYPE: Modification | | NO. OF BEDROOMS / GPD: 3 | RESTRICTIVE SOIL HORIZON DEPTH (inches): | | |
| LOT SIZE (SQ FT/Acres): 0.69 | | LEVEL OF PLUMBING OUTLET: Ground Level | SOIL TEST PERFORMED BY: | | |
| Section B - Primary / Pretreatment | | | | | |
| PRETREATMENT: Septic Tank | GARBAGE DISPOSAL: NO | SEPTIC TANK CAPACITY (gallons): 1500 | MIN. ATU CAPACITY (gallons): 0 | DOSING TANK CAPACITY (gallons): | GREASE TRAP CAPACITY (gallons): |
| Section C - Secondary Treatment | | | | | |
| ABSORPTION FIELD DESIGN: Serial | | NUMBER OF TRENCHES: DISTANCE B/W TRENCHES: | | TOTAL ABSORPTION FIELD LINEAR FT REQUIRED: | |
| ABSORPTION FIELD PRODUCT: Quick 4 Plus High Capacity - 14 | | DEPTH OF TRENCHES (range in inches): | | TOTAL ABSORPTION FIELD SQ FT REQUIRED: | |
| Issued permits expire twelve (12) months from approval date and are not valid unless signed below by authorized representative of the Georgia Department of Public Health or County Board of Health. | | | | | |
| Any grading, filling, or other landscaping after issuance of a permit may render permit void. Failure to follow site plan may render permit void. Any grading, filling, or other landscaping after final inspection by county health department, which adversely affects the function of the on-site sewage management system, may render approval void. Installation contractor is responsible for ensuring all required setbacks are met. | | | | | |
| Issuance of a construction permit for an on-site sewage management system and subsequent approval of same by representative of the Georgia Department of Public Health or County Board of Health shall not be construed as a guarantee that such systems will function satisfactorily for a given period of time; furthermore, said representative(s) do not, by any action taken in effecting compliance with these rules, assume any liability for damages which are caused, or which may be caused, by the malfunction of such system. | | | | | |
| INSPECTOR & INSPECTOR TITLE: Emily McGahee Environmental Health Specialist IV | INSPECTOR SIGNATURE:  | | DATE: 06/16/2025 | CONSTRUCTION PERMIT #: OSC06910183 | STATUS: Approved |

1/2



**Construction Permit and Site Approval
For On-Site Sewage Management System (continued)
Hall County Environmental Health - Phone: (770) 531-3973
Permit Number: OSC06910183
Property Address: 5 RAY ST GAINESVILLE, GA 30504**

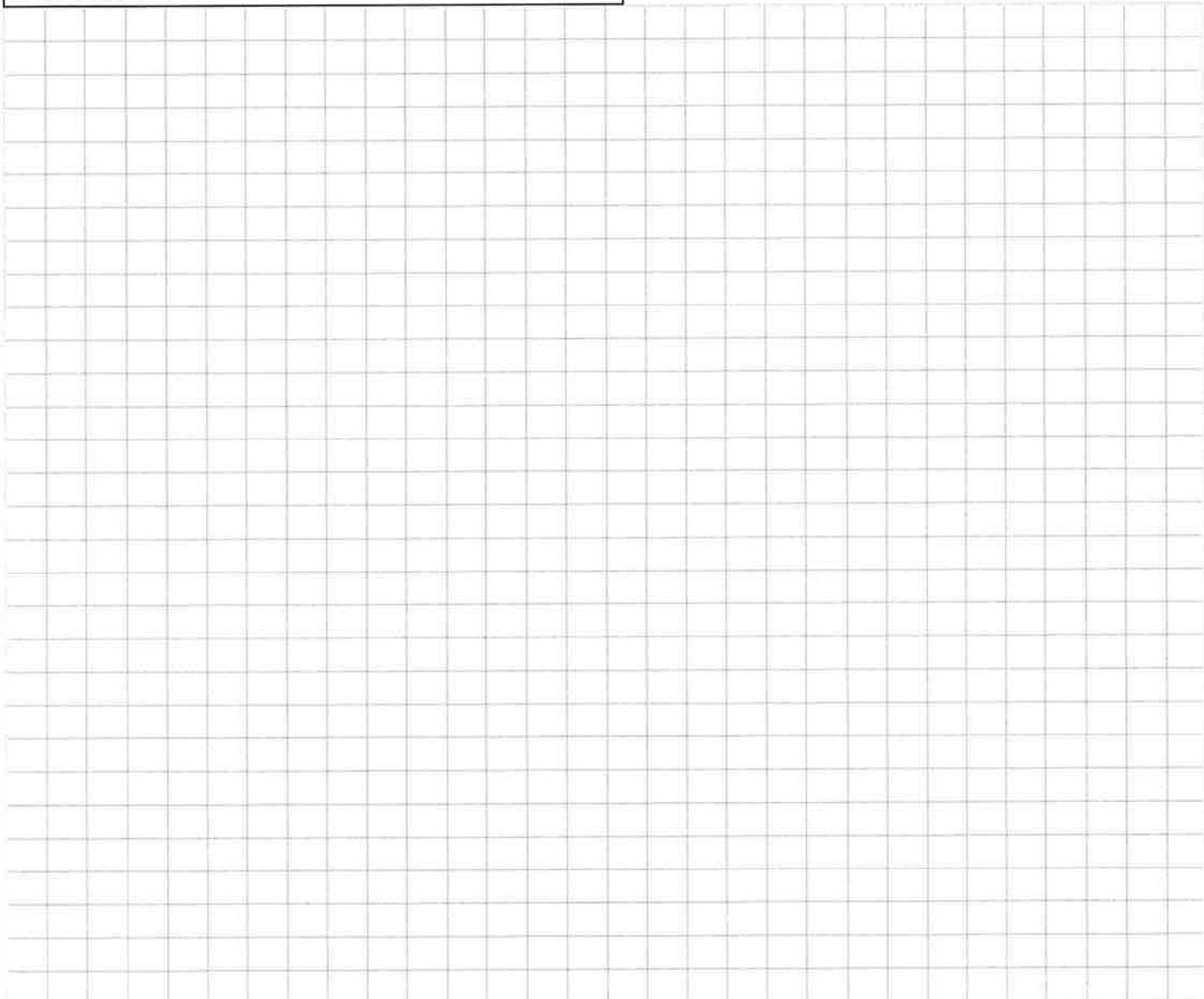
PRIMARY / PRETREATMENT REMARKS

PUMP, CRUSH, AND FILL EXISTING SEPTIC TANK. INSTALL NEW 1500 GALLON TANK A MINIMUM OF 5' FROM ALL STRUCTURES AND HARDCAPES. TANK MUST BE PROTECTED FROM VEHICULAR TRAFFIC. BOTH SEWER LINES FROM THE HOMES MUST HAVE INLET T'S IF ENTERING THE SEPTIC TANK SEPARATELY THROUGH PRECAST KNOCK-OUT HOLES.

SECONDARY TREATMENT REMARKS

DISCONNECT ALL OLD GRAVEL AND PIPE DRAINLINE FROM CHAMBER SYSTEM. CUT OFF AND REPLACE (IN QUALIFIED SOIL ONLY) FOOT FOR FOOT ANY CHAMBER THAT DOES NOT MEET SETBACKS TO STRUCTURES/HARDCAPES .

PROPOSED SYSTEM LAYOUT / DESIGN



GEORGIA DEPARTMENT OF PUBLIC HEALTH
Hall County Environmental Health
2875 Browns Bridge Road, Gainesville, Georgia 30504, Phone: (770)531-3973
Email Address: environmental@hallcounty.org

Application for Septic Permit

Property Information:

Subdivision: _____ Gate Code: _____
Lot: _____ Block: _____
Property Address: S Ray st Gainesville GA 30504
Street City State Zip

Owner's Name: Andres Hernandez sierra Owner's Email: _____

Owner's Address: S Ray st Gainesville Hall GA 30504

Owner's Primary Phone #: _____ Owner's Alternate Phone #: _____

Authorized Agent Name: Chris condo Address: 1786 crow dr Gainesville ga 30504

Authorized Agent Phone #: _____ Authorized Agent Email: _____

Relationship to Owner: Co - Owner Builder Septic Contractor Other friend

Septic Contractor First & Last Name: _____

Septic Company Name: _____

Water Supply: Public Water Individual Well Community Well EPD Permitted Well

Type of Work: New (Date House Staked): 5/30/25 Repair Addition

Lot Size: _____

Type of Structure: Single Family Residence Multi Family Residence Commercial <2000gpd Commercial >2001gpd

Water Usage By: Number of Bedrooms: 4 Gallons Per Day: _____

Level of Plumbing: Ground Level Basement Above Ground Level

Garbage Disposal: Yes No

Absorption Field Product: EZ Flow 1303T Quick 4+ HC ARC High 36 HC Other: _____

***** If this is a repair:

Date septic tank pumped _____

Describe failure _____

Location of Failure _____

(New Residential Installations) - The drawing must show house dimensions, setbacks from property lines, driveways, amenities, desired septic system area, debris or burn pit locations and dimensions.

Signature: Andres Hernandez sierra Application Date: 5/30/25

#1164288

Onsite sewage management system permits are valid for 12 months from the date of issue according to the Rules and Regulations for the State of Georgia, Chapter 511-3-1-03(3). (See applicable initial permit fee schedule.) If a property owner or builder comes in to renew a residential septic permit just prior to the expiration date and this is the first renewal, there will be a re-evaluation fee charged and a site visit will need to be performed prior to issuance. If a permit has expired or has been renewed once before, the initial fee will apply for a new permit and a site visit will need to be performed prior to issuance of the permit. If a permit has never been issued, the permit expires 12 months from the application date. Permit fees are subject to change to reflect the current fee schedule.

All surface and/or ground water must be diverted around sewage system.

There must be sufficient space on the property to install a primary and backup conventional on-site sewage system for previously undeveloped lots.

As of 2/20/2000, any person/persons installing on-site sewage management systems must be certified by the State or an approval for the system will not be issued.

When installing a new system or a repair, if there are indications of unsuitable soils or other concerns please cease work and notify the Hall County Environmental Health Department. Sediment and soil erosion controls must be sufficient and remain in place.

Inlet and outlet tees must be in place at the time of inspection. If inlet plumbing is not hooked to the building at time of inspection, inlet tee must be cemented or secured to tank.

A repair permit is issued to correct a failing septic system. If no portion of the existing system can be utilized and the entire system is replaced, the property owner is responsible for the additional permit fee prior to any approval of the system. For all systems including repairs, the amount of drain line must accommodate the number of bedrooms.

If crossing drain line, water lines must be installed 12" above aggregate layer and encased in a single length of pipe 10' from drain lines.

Any modification to the lot that would adversely affect the on-site sewage management system or the replacement area could render the permit or the final approval void.

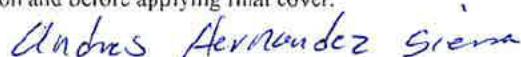
In the event an on-site sewage management system, alternative system or soil fill installation is installed, notice shall be delivered to the owner of such property and in the event of new construction homes or commercial buildings, notice must be delivered to new owner, by the homebuilder/contractor, at the time of conveyance on such property stating the type of installation, design and maintenance needs.

Advanced Treatment Systems:

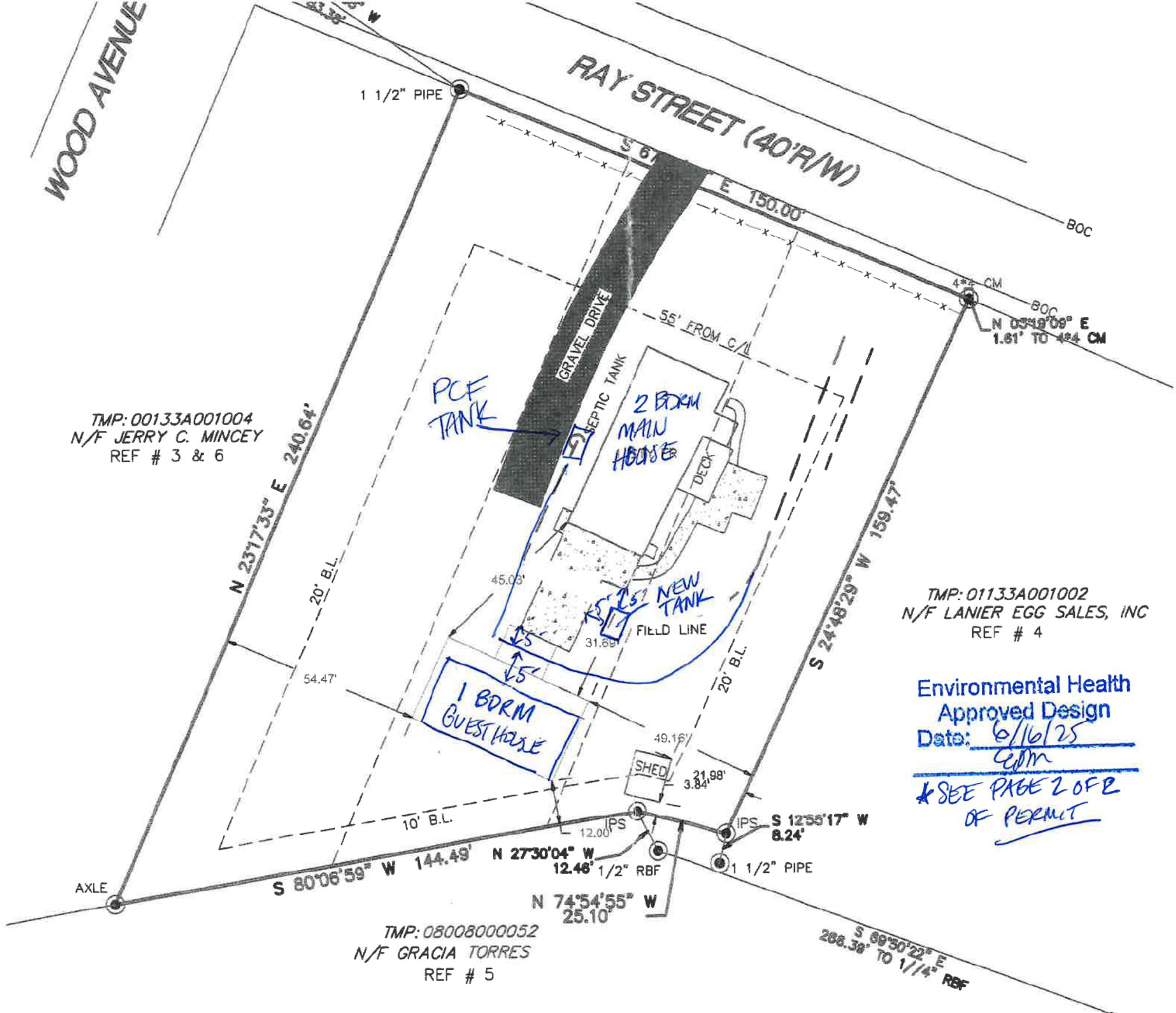
1. Owners of an Advanced Treatment System are responsible for renewing their annual operating permit. The following information must be submitted and in compliance before the permit renewal date:
 - a. Copy of the current and renewal service agreement.
 - b. Copy of the maintenance contractor's certification.
 - c. Copies of the service inspection reports.If the proper paperwork is submitted as required, the Environmental Health office will mail the renewal of the operating permit to the current homeowner.
2. If the proper paperwork is not submitted prior to the renewal date, the Environmental Health office will notify the owner. If the paperwork is turned in within 30 days of notification and is in compliance, the Advanced Treatment Systems Operating Permit will be renewed and mailed to the current homeowner.
3. If the proper paperwork is not turned in within 30 days or is not in compliance, a re-inspection will be performed. The current re-inspection fee will be applicable. The department will notify the current owner that the operating permit is revoked and initiate enforcement action.

Issuance of a construction permit for an on-site sewage management system and subsequent approval of same by representatives of the Georgia Department of Public Health or County Board of Health shall not be construed as a guarantee that such systems will function satisfactorily for a given period of time. Furthermore, said representatives do not by any action in effecting compliance with these rules, assume any liability for damages which are caused, or which may be caused, by the malfunction of such system.

I hereby apply for a construction permit to install an on-site sewage management 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 511-3-1. I have read and will comply with the additional requirements printed above. I understand that final inspection is required and will notify the Hall County Environmental Health Department upon completion of construction and before applying final cover.



Signature - I have read the above



IF PROPERTY IS LOCATED IN THE NORTH OCONEE WATERSHED DISTRICT, THEN ADDITIONAL STREAM BUFFERS AND IMPERVIOUS SETBACKS MAY BE REQUIRED FOR COMPLIANCE. (HALL COUNTY CODE § 17.225.040)

THIS PROPERTY OR A PORTION THEREOF IS NOT LOCATED IN A FLOOD HAZARD AREA AS SHOWN ON FLOOD INSURANCE RATE MAP 1313900189G, HALL COUNTY GEORGIA, DATED APRIL 4, 2018.

THIS PROPERTY OR A PORTION THEREOF IS NOT LOCATED IN THE HALL COUNTY STUDIED FLOOD ZONE PER HALL COUNTY GIS.

IF RESIDENTIAL PROPERTY IS SUBDIVIDED INTO SEVEN LOTS OR MORE WITH ALL LOTS ACCESSING EXISTING HALL COUNTY, GEORGIA ROADS, THEN STORM WATER MANAGEMENT IS REQUIRED FOR COMPLIANCE. (HALL COUNTY CODE § 8.180.160)

SURVEYOR'S CERTIFICATE:

It is hereby certified that all monuments and improvements shown actually exist except otherwise indicated, and that their location, size, material are correctly shown.

SURVEYOR'S CERTIFICATE: (STATE)

This plat is a retraction of an existing parcel or parcels of land subdivide or create a new parcel or make any changes to any real boundaries. The recording information of the documents, maps, plan instruments which created the parcel or parcels are stated hereon. RECORDATION OF THIS PLAT DOES NOT IMPLY APPROVAL OF ANY LOCAL JURISDICTION, AVAILABILITY OF PERMITS, COMPLIANCE WITH LOCAL REQUIREMENTS, OR SUITABILITY FOR ANY USE OR PURPOSE OF THE PLAT. Furthermore, the undersigned land surveyor certifies that this plat meets the minimum technical standards for property surveys in Georgia as the rules and regulations of the Georgia Board of Registration for Engineers and Land Surveyors and as set forth in O.C.G.A. Section

Billy M. Miller No.3194



RSP Environmental, LLC
 8475 Lanierland Farms Drive
 Gainesville, GA 30506
 470-590-1967
 ryan@rspenv.com

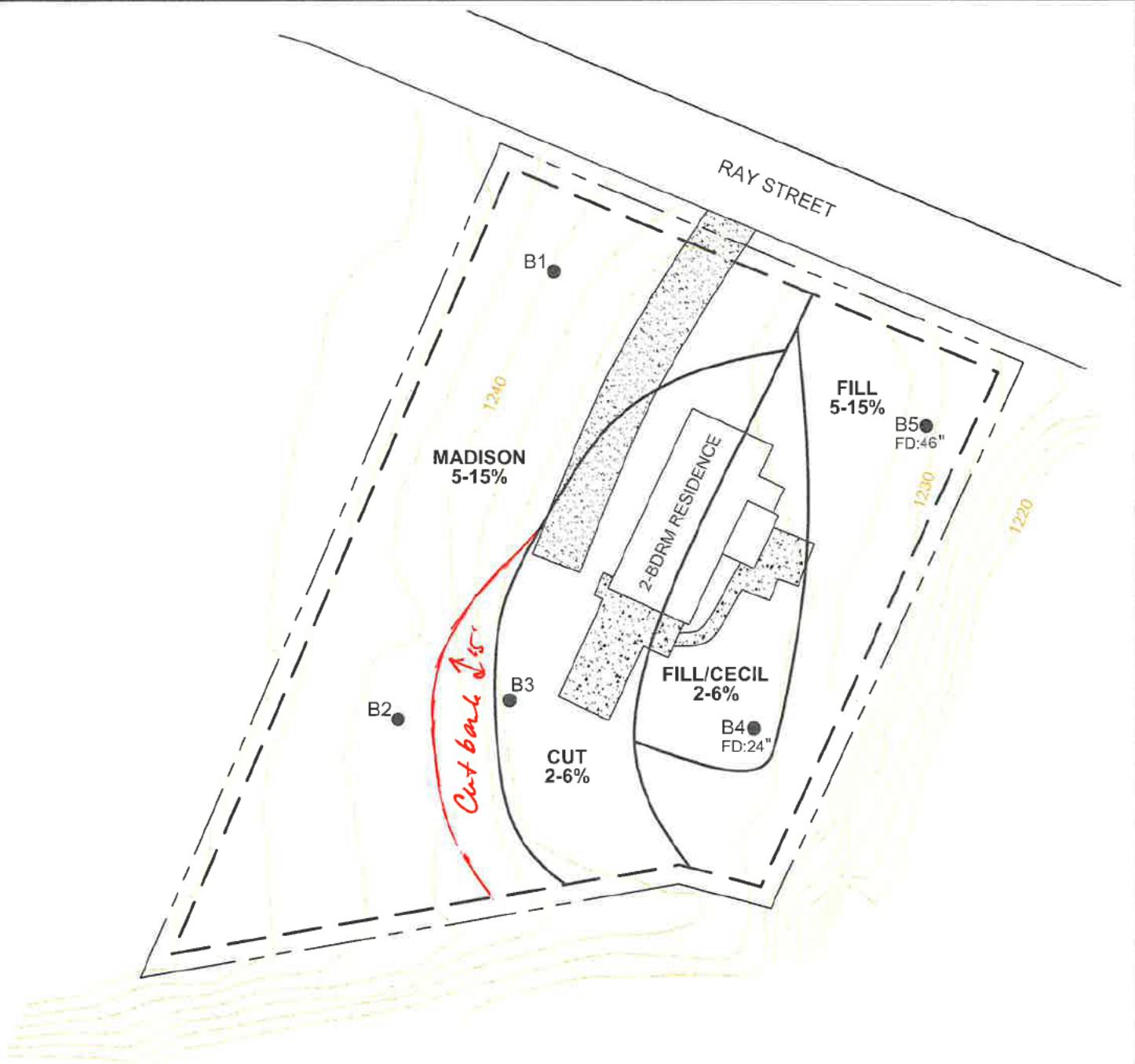
LEVEL 3 SOIL REPORT

| Property Information | |
|---------------------------------|---------------------------|
| Report Date: 3/21/2025 | Fieldwork Date: 3/20/2025 |
| Address: 5 Ray Street | Job No.: SS-2544-1 |
| Parcel ID: 00133A001003 | Client: Jay McNair |
| City, County: Gainesville, Hall | Map Scale: 1:40 |

| Map Unit Properties | | | | | | |
|---------------------|---------|------------------------------------|--|--|-----------------------------------|------------------|
| SOIL SERIES | SLOPE % | DEPTH TO REFUSAL/ BEDROCK (INCHES) | DEPTH TO SEASONAL HIGH OR PERCHED WATER TABLE (INCHES) | ESTIMATED ABSORPTION RATE AT RECOMMENDED TRENCH DEPTH (MIN/IN) | RECOMMENDED TRENCH DEPTH (INCHES) | SUITABILITY CODE |
| Madison | 5-15 | >72 | >72 | 50 | 30-42 | A |
| Fill/Cecil | 2-6 | >72 | >72 | 75 | 36-42 | A |
| Cut | 2-6 | >72 | >72 | 50 | 24-36 | A |
| Fill | 5-15 | >72 | >72 | See Code | See Code | F |

| Map Unit Suitability Codes | |
|----------------------------|---|
| A | These soils are suitable for installation of on-site systems with proper system design, installation, and maintenance. Position of the site or other soil and landscape considerations may require the drainfield area to be greater than the minimum and/or the drainfield design to require equal distribution or level field installation. |
| F | Because of soil limitations, these soils are unsuitable for installation of an on-site system. |

| Notes | |
|---|--|
| <ul style="list-style-type: none"> Disturbance of soil by cutting or filling prior to drainfield installation may void the suitability of the soil. Soil boring locations, soil boundaries, and site features are shown on the attached Level 3 Soil Map. Property boundaries were obtained from a site plan provided by the client. Topographic contours were obtained from qpublic.net Soil borings were located with a ublox ZED-F9P GNSS. Wells require a 100-ft setback. RSP will attempt to identify wells visible from the subject property and public right-of-ways, but it is the responsibility of the owner/buyer/agent to ensure there are no wells on the subject property or adjoining properties that would impact the suitability of the site for a septic system. | |



LEVEL 3 SOIL MAP

REPORT DATE: 3/21/2025

5 RAY STREET

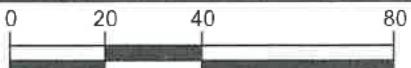
PARCEL ID: 00133A001003

GAINESVILLE, HALL COUNTY, GA

PROPERTY AREA: 0.69 AC

SOIL SURVEY AREA: 0.58 AC

SCALE:
1 IN = 40 FT



RSP ENVIRONMENTAL, LLC

8475 LANIERLAND FARMS DRIVE

GAINESVILLE, GA 30506

470-590-1967

ryan@rspenv.com

LEGEND

- B1 ● SOIL BORING
- ~~~~ SOIL BOUNDARY
- SURVEY AREA
- - - PROPERTY BOUNDARY
- 2-FT TOPOGRAPHIC CONTOUR
- FD FILL DEPTH



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

| | | |
|--|--|------------------------------------|
| PRODUCER biBERK P.O. Box 113247 Stamford, CT 06911 | CONTACT NAME: PHONE (A/C, No, Ext): 844-472-0967 E-MAIL ADDRESS: customerservice@biBERK.com | FAX (A/C, No): 203-654-3613 |
| | INSURER(S) AFFORDING COVERAGE INSURER A: Berkshire Hathaway Direct Insurance Company | NAIC # 10391 |
| INSURED RSP Environmental 8475 Lanierland Farms Dr Gainesville, GA 30506 | INSURER B: INSURER C: INSURER D: INSURER E: INSURER F: | |

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

| INSR LTR | TYPE OF INSURANCE | ADD'L INS'D W'D | SUB'R W'D | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS | |
|-------------|---|--------------------------|----------------------|---------------|----------------------------|----------------------------|--|-----------------------------|
| | | | | | | | | |
| | COMMERCIAL GENERAL LIABILITY | | | | | | EACH OCCURRENCE | \$ |
| | <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR | | | | | | DAMAGE TO RENTED PREMISES (Each occurrence) | \$ |
| | | | | | | | MED EXP (Any one person) | \$ |
| | | | | | | | PERSONAL & ADV INJURY | \$ |
| | | | | | | | GENERAL AGGREGATE | \$ |
| | | | | | | | PRODUCTS - COMP/OP AGG | \$ |
| | | | | | | | OTHER | \$ |
| | AUTOMOBILE LIABILITY | | | | | | COMBINED SINGLE LIMIT (Each accident) | \$ |
| | ANY AUTO | | | | | | BODILY INJURY (Per person) | \$ |
| | OWNED AUTOS ONLY | <input type="checkbox"/> | SCHEDULED AUTOS | | | | BODILY INJURY (Per accident) | \$ |
| | Hired AUTOS ONLY | <input type="checkbox"/> | NON-OWNED AUTOS ONLY | | | | PROPERTY DAMAGE (Per accident) | \$ |
| | | | | | | | | \$ |
| | UMBRELLA LIAB | <input type="checkbox"/> | OCCUR | | | | EACH OCCURRENCE | \$ |
| | EXCESS LIAB | <input type="checkbox"/> | CLAIMS-MADE | | | | AGGREGATE | \$ |
| | DED | RETENTION\$ | | | | | | \$ |
| | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY | | | | | | PER STATUTE | OTH- ER |
| | ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) | <input type="checkbox"/> | N/A | | | | E.L. EACH ACCIDENT | \$ |
| | if yes, describe under DESCRIPTION OF OPERATIONS below | | | | | | E.L. DISEASE - EA EMPLOYEE | \$ |
| | | | | | | | E.L. DISEASE - POLICY LIMIT | \$ |
| A | Professional Liability (Errors & Omissions): Claims-Made | | | N9PL380482 | 04/13/2024 | 04/13/2025 | Per Occurrence/ Aggregate | \$1,000,000/ \$1,000,000 |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

| CERTIFICATE HOLDER | CANCELLATION |
|--|--|
| Georgia Department of Public Health Two Peachtree Street NW 13th Floor Atlanta, GA 30303 | SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. |

eFiled and eRecorded
DATE: 03/13/2025
TIME: 5:42 PM
PLAT BOOK: 886
PAGE: 427 - 427
FILING FEES: \$10.00
RECORDED BY: CH
Mark Pettitt
Hall County, GA

TOTAL AREA: 0.66 Ac.

28,727 sq. ft.

PROPERTY INFORMATION:

ADDRESS: 5 RAY STREET, GAINESVILLE, GA 30504

TAX MAP: 00133A 001003

ZONING: R-8
SETBACKS:
FRONT: 10' FROM P/L OR 55' C/L WHICHEVER IS GREATER
SIDE: 20'
REAR: 10'

ANY STREAM OR STATE WATER LOCATED ON THIS PROPERTY
MAY BE SUBJECT TO A 50 FEET UNDISTURBED NATURAL
VEGETATIVE BUFFER AND A 75 FEET IMPERVIOUS SURFACE
SETBACK (HALL COUNTY CODE § 8.170.070).

IF PROPERTY IS LOCATED IN THE NORTH OCONEE WATERSHED DISTRICT, THEN ADDITIONAL STREAM BUFFERS AND IMPERVIOUS SETBACKS MAY BE REQUIRED FOR COMPLIANCE. (MILL COUNTY CODE # 17.225.040)

THIS PROPERTY OR A PORTION THEREOF IS NOT LOCATED IN A FLOOD HAZARD AREA AS SHOWN ON FLOOD INSURANCE RATE MAP 13139001880, HALL COUNTY, GEORGIA, DATED APRIL 4, 2018.

THIS PROPERTY OR A PORTION THEREOF IS NOT LOCATED IN THE HALL COUNTY STUDIED FLOOD ZONE PER HALL COUNTY CIS.

IF RESIDENTIAL PROPERTY IS SUBDIVIDED INTO SEVEN LOTS OR MORE WITH ALL LOTS ADDRESSING EXISTING HALL COUNTY, GEORGIA ROADS, THEN STORM WATER MANAGEMENT IS REQUIRED FOR COMPLIANCE (HALL COUNTY CODE § 8.180.180).

REFERENCES

- 1) PLAT BOOK 2, PAGE 39-41
- 2) DEED BOOK 6036, PAGE 259
- 3) PLAT BOOK 134, PAGE 212
- 4) DEED BOOK 2212, PAGE 284
- 5) DEED BOOK 3808, PAGE 541
- 6) DEED BOOK 24008, PAGE 408

SURVEY NOTES

1) FIELD DATA-CLOSURE PRECISION 1:21,682;
ANGULAR ERROR - 347.575A

2) MEASUREMENTS WERE TAKEN WITH A TTS-2022 ON
11-19-23 AND WERE BALANCED USING THE COMPASS RULE.

3) BEARINGS ARE BASED ON REFERENCE 2.

4) THIS MAP OR PLAT HAS BEEN CALCULATED FOR CLOSURE
AND IS FOUND TO BE ACCURATE WITHIN ONE FOOT IN 144,640
FEET.

5) THE PUBLIC RECORDS REFERENCED HEREIN REFLECT ONLY
THOSE RECORDS NECESSARY TO ESTABLISH THE BOUNDARIES
HEREIN, AND REFERENCE TO THE SAME DOES NOT AND IS
NOT INTENDED TO CONSTITUTE A TITLE SEARCH OR TITLE
OPINION.

6) NO PORTION OF THIS PROPERTY IS LOCATED IN A SPECIAL
FLOOD AREA AS INDICATED ON FIRM NO. 131,80011950
DATED APRIL 6, 2016.

7) THIS PROPERTY MAY BE SUBJECT TO EXISTING RIGHTS
OF WAY OR RESTRICTIONS WHICH MAY EXIST AND NOT SHOWN
HEREON.

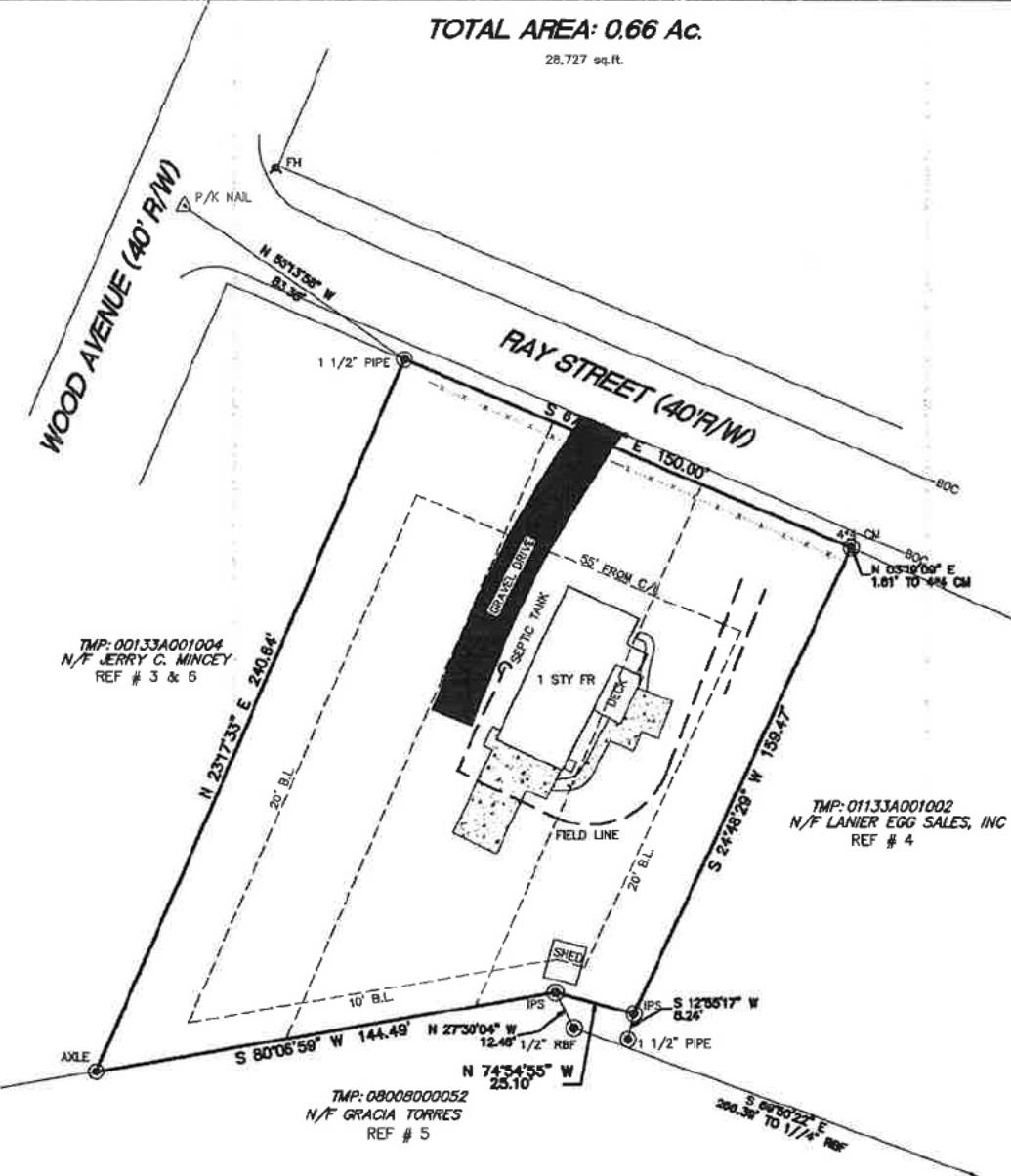
AMF INDICATES ALUMINUM DISK FOUND
 AI INDICATES ANGLE IRON
 IR INDICATES IRON
 CT INDICATES CRIMPED TOP PIPE
 DI INDICATES DIA. OF TUBE
 P INDICATES PIPING
 C INDICATES CABLE
 CP INDICATES POWER POLE
 R/W INDICATES RIGHT-OF-WAY
 PA INDICATES PROPERTY LINE
 BL INDICATES BUILDING LINE
 FC INDICATES FOUNDATION
 MB INDICATES MUD BERM
 WB INDICATES WATCH BASIN
 WM INDICATES WATER METER
 FH INDICATES FIRE HYDRANT
 EP INDICATES EDGE OF PAVING
 BOC INDICATES BACK OF CURB
 L INDICATES LINE
 LPL INDICATES LOT LINE
 1/2 INDICATES 1/2 INCH AND REAR SET
 IC INDICATES INDICATOR
 IP INDICATES IRON PIPE
 WP INDICATES WATER POLE
 W INDICATES WATER VALVE

PLAT DATE: DECEMBER 3, 2023

30 0 15 30 60 12

(IN FEET)

| | | | | |
|----------------|----------------|------------|-------------|--------------------|
| <u>SURVEY</u> | <u>BMM</u> | | | |
| <u>DRAWN</u> | <u>BMM</u> | | | |
| <u>DATE</u> | | | | |
| <u>CHECKED</u> | <u>BMM</u> | | | |
| <u>SCALE</u> | | | | |
| <u>100-100</u> | <u>100-100</u> | <u>NO.</u> | <u>DATE</u> | <u>DESCRIPTION</u> |



RETRACEMENT SURVEY FOR
ANDRES HERNANDEZ SIERRA
LAND LOT 169, 9th DIST.
HALL COUNTY, GEORGIA

BILLY M MILLER
7321 LITTLE MILL ROAD
CUMMING, GEORGIA 30041
PH:770-351-2242





GAINESVILLE, GA 30504

Physical Address 5 RAY ST

3/21
11/1

