

DAWSON COUNTY VARIANCE APPLICATION

This portion to be completed by Zoning Administrator

VR 20-13 Tax Map & Parcel # (TMP): 095-223
Current Zoning: RSKmm Commission District #: 2
Submittal Date: 6-12-2020 Time: 9:14 am/pm Received by: Unape (staff initials)
Fees Assessed: \$350 Paid: CASH
Planning Commission Meeting Date: July 21, 2020

APPLICANT INFORMATION (or Authorized Representative)

Printed Name: Russ chambers
Address: 30534
Phone: Listed _____ Email: Business _____
Unlisted _____ Personal gmail.com
Status: Owner [] Authorized Agent [] Lessee [] Option to purchase

Notice: If applicant is other than owner, enclosed Property Owner Authorization form must be completed.

I have _____ /have not X participated in a Pre-application meeting with Planning Staff.
If not, I agree ✓ /disagree _____ to schedule a meeting the week following the submittal deadline.
Meeting Date: By July 21st Applicant Signature: Russ Chambers

PROPERTY INFORMATION

Street Address of Property: 35 Irvin Drive Dawsonville GA
30534
Land Lot(s): 780 + 781 District: 4th Section: 1st
Subdivision/Lot: _____ Building Permit #: _____ (if applicable)
Directions to the Property: From Dawsonville Historic Court House 9 South APPROX
3 Miles Turn left onto Jenkins Road, Turn left onto Irvin Drive
First Drive Way on left.

REQUESTED ACTION

A Variance is requested from the requirements of Article # _____ Section # _____ of the Land Use Resolution/Sign Ordinance/Subdivision Regulations/Other (circle one).

If other, please describe: _____

Type of Variance requested:

Front Yard [] Side Yard [] Rear Yard variance of 13' feet to allow the structure to:

be constructed; [] remain a distance of _____ feet from the: front Property line

property line, [] road right of way, or [] other (explain below):

instead of the required distance of 40' required by the regulations.

[] Lot Size Request for a reduction in the minimum lot size from _____ to _____

[] Sign Variance for: _____

[] Home Occupation Variance to operate: _____ business

[] Other (explain request): _____

If there are other variance requests for this site in past, please list case # and nature of variance: _____

Variations to standards and requirements of the Regulations, with respect to open area, setbacks, yard area, lot coverage, height, and other quantitative requirements may be granted if, on the basis of the application, investigation, and other evidence submitted by the applicant, all four (4) expressly written findings below are made:

1. Describe why a strict and literal enforcement of the standards would result in a practical difficulty or unnecessary hardship: I own 4.1 Acres that previously had a mobile

home that burnt down. I am requesting to place a new mobile

home exactly in the same place. This location is the only practical

place to construct due to rest of property being extremely steep
terrain.

2009 JUN 2 9:14 AM

2. Describe the exceptional and extraordinary conditions applicable to this property which do not apply to other properties in the same district: The surrounding Area is MAJORITY
Mobile homes. The surrounding areas are very steep terrain.
Most of the mobile homes are prior to the 40' set BACK rule, Construction
on my lot is needed to be placed near the front Property line Due to terrain
3. Describe why granting a variance would not be detrimental to the public health, safety, morals or welfare and not be materially injurious to properties in the near vicinity: The lot has a new Perk test
it has been EVALuated By Health Department. I will use existing
1,000 GALLON TANK & field line However I will ADD nearly 100' of Infiltrator line,
I PLAN only Disturbing the 28' X 76 PAD of mobile home.
4. Describe why granting this variance would support the general objectives within this Resolution:
All set BACKS would be observed EXCEPT for front setback, The Construction
of Home would be a Good fit for the Community, I would be using
existing utilities.

Submit clear explanation of all four questions above. You may add sheets if necessary.

(Variances should not be granted if the need arises as a result of action by the applicant or previous owner.)

20 JUN 12 9:14 AM

PROPERTY OWNER AUTHORIZATION

I / we Russ chambers Danielle Chambers hereby swear that I / we own the property located at (fill in address and / or tax map & parcel #):

35 Irvin Drive - 095 223 2.61 Acres

Irvin Driv - 095 221 1.53 Acres

as shown in the tax maps and / or deed records of Dawson County, Georgia, and which parcel will be affected by this request.

I hereby authorize the person named below to act as the applicant or agent in pursuit of the variance requested on this property. I understand that any variance granted, and / or conditions placed on the property will be binding upon the property regardless of ownership. The under signer below is authorized to make this application. The under signer is aware that no application or reapplication affecting the same land shall be acted upon within 6 months from the date of the last action by the Board of Commissioners.

Printed name of applicant or agent: Russ chambers

Signature of applicant or agent: Russ chambers Date: 6-11-20 20

Printed Name of Owner(s): Russ chambers Danielle chambers

Signature of Owner(s): Russ chambers Danielle Chambers Date 6-11-20

Sworn and subscribed before me this 11th day of June, 2020.

Rosalind Lucy Chambers
Notary Public

Rosalind Lucy Chambers
Notary Public
Dawson County, Georgia
My Commission Expires 1-16-22



(The complete names of all owners must be listed, if the owner is a partnership, the names of all partners must be listed, if a joint venture, the names of all members must be listed. If a separate sheet is needed to list all names, please identify as applicant or owner and have the additional sheet notarized also.)

20 JUN 12 9:14 AM

VR# _____

TMP# _____

List of Adjacent Property Owners

It is the responsibility of the Applicant to provide a list of adjacent property owners. This list must include the name and address of anyone who has property touching your property or who has property directly across the street from your property.

****Please note this information should be obtained using the Tax Map and Parcel Number listing any parcel(s) adjoining or adjacent to parcel where variance or rezone is being requested.**

Name

Address

TMP <u>095222</u>	1. <u>Annie M Gayton</u>	<u>43 Irvin Dr</u>
TMP <u>095027</u>	2. <u>Frank & Angelia Huber</u>	<u>127 Irvin Dr</u>
TMP <u>085096</u>	3. <u>Gerry & Martha Lindsey</u>	<u>300 Hampton Dr</u>
TMP <u>095206</u>	4. <u>R. Wesley & Rosalind Chambers</u>	<u>33 Irvin Dr</u>
TMP <u>095182</u>	5. <u>R. Wesley & Rosalind Chambers</u>	<u>19 Irvin Dr</u>
TMP _____	6. _____	_____
TMP _____	7. _____	_____
TMP _____	8. _____	_____
TMP _____	9. _____	_____
TMP _____	10. _____	_____
TMP _____	11. _____	_____
TMP _____	12. _____	_____
TMP _____	13. _____	_____
TMP _____	14. _____	_____
TMP _____	15. _____	_____

Use additional sheets if necessary.

7:20 JUN 12 9:15AM

APPLICANT CERTIFICATION

I hereby request the action contained within this application relative to the property shown on the attached plats and site plan and further request that this item be placed on both the Planning Commission and Board of Commissioners agenda(s) for a public hearing.

I understand that the Planning & Development staff may either accept or reject my request upon review. My request will be rejected if all the necessary data is not presented.

I understand that I have the obligation to present all data necessary and required by statute to enable the Planning Commission and Board of Commissioners to make an informed determination on my request. I will seek the advice of an attorney if I am not familiar with the zoning and land use requirements.

I understand that my request will be acted upon at the Planning Commission and Board of Commissioner hearings and that I am required to be present or to be represented by someone able to present all facts. I understand that failure to appear at a public hearing may result in the postponement or denial of my special use or rezoning application. I further understand that it is my responsibility to be aware of relevant public hearing dates and times regardless of notification from Dawson County.

I hereby certify that I have read the above and that the above information as well as the attached information is true and correct.

Signature of Applicant or Agent: Russ Cham Date: 6-11-2020

Signature of Witness: Rebecca Chambliss Date: 6/11/2020

WITHDRAWAL

Notice: This section only to be completed if application is being withdrawn.

I hereby withdraw application #: _____

Signature: _____ Date: _____

Withdrawal of Application:

Withdrawals of any application may be accommodated within the Planning & Development office if requested before the Planning Commission agenda is set. Therefore, withdrawals may not be made after ten (10) days prior to the scheduled Planning Commission meeting hearing, unless accompanied by written request stating specific reasons for withdrawal. This withdrawal request is to be published in the legal organ prior to the meeting. Following that written request and publication the Commission will vote to remove the item from the agenda at the scheduled hearing. Please note that should the withdrawal be denied, the item will receive deliberation and public hearing with a decision by the Commission. Further the applicant is encouraged to be present at the hearing to substantiate reasons for withdrawal. Please note that no refund of application fee may be made unless directed by the Board of Commissioners.

20 JUN 12 9:15 AM

Dawson County, Georgia Board of Commissioners
Affidavit for Issuance of a Public Benefit
As Required by the Georgia Illegal Immigration Reform and Enforcement Act of 2011

By executing this affidavit under oath, as an applicant for a Dawson County Business License, Out of County Business Registration, Alcohol License, or other public benefit as referenced in the Georgia Illegal Immigration Reform and Enforcement Act of 2011 [O.C.G.A. § 50-36-1(e)(2)], I am stating the following with respect to my application for such Dawson County public benefit.

- X I am a United States citizen.
- I am a legal permanent resident of the United States. (FOR NON-CITIZENS)
- I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act with an alien number issued by the Department of Homeland Security or other federal immigration agency. (FOR NON-CITIZENS)

My alien number issued by the Department of Homeland Security or other federal immigration agency is:

The undersigned applicant also hereby verifies that he or she is 18 years of age or older and has provided at least one **secure and verifiable document**, as required by O.C.G.A. § 50-36-1(e)(1), with this affidavit. (See reverse side of this affidavit for a list of secure and verifiable documents.)

The secure and verifiable document provided with this affidavit can best be classified as:

In making the above representation under oath, I understand that any person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an affidavit shall be guilty of a violation of O.C.G.A. § 16-10-20 and face criminal penalties as allowed by such criminal statute.

Executed in Dawsonville (city), Georgia (state)

Russ Chambers
Signature of Applicant

Date

Russ Chambers
Printed Name

Name of Business

SUBSCRIBED AND SWORN BEFORE ME ON

THIS 12th DAY OF June, 2020

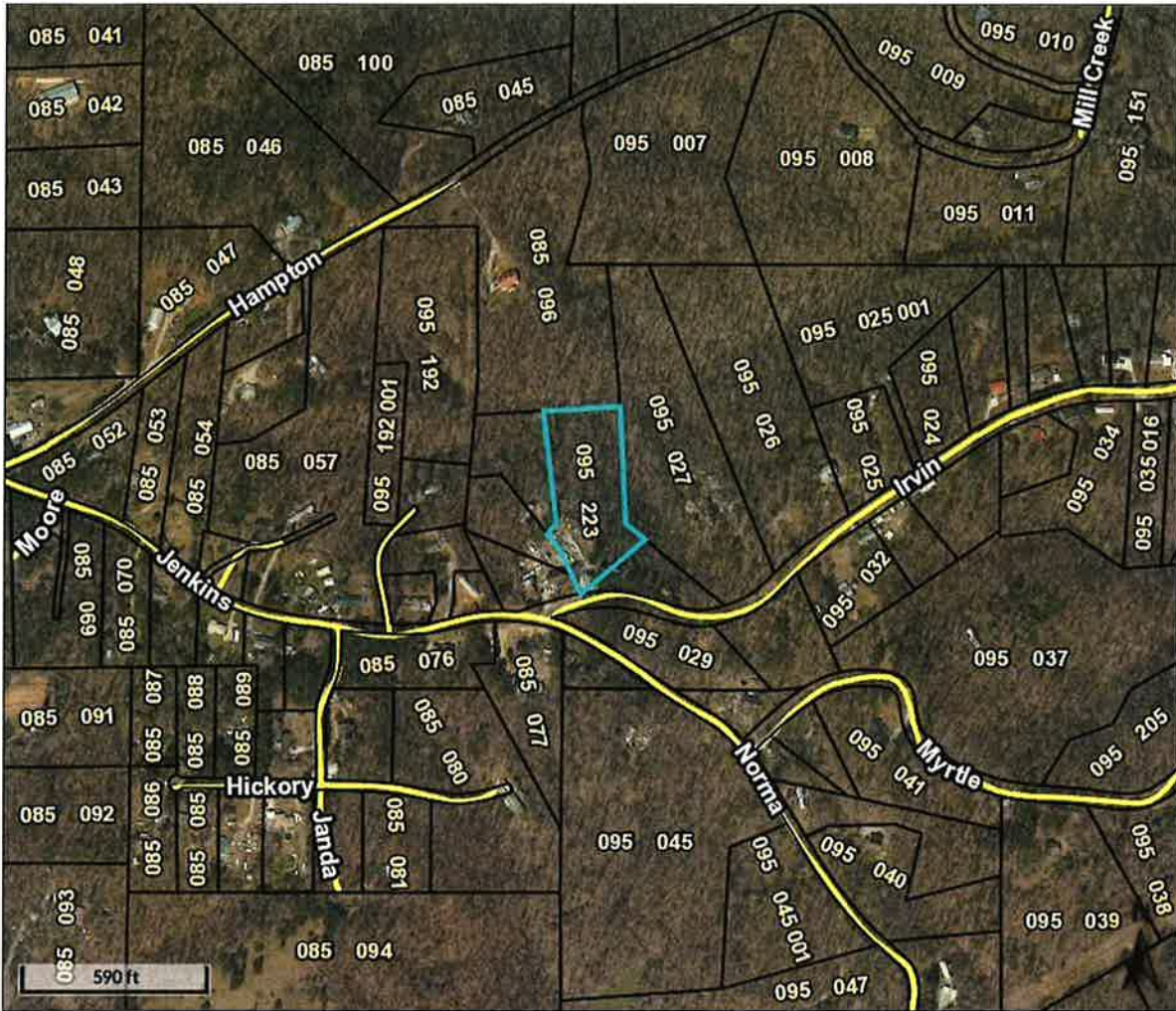
Rosalind Lucy Chambers Notary Public

My Commission Expires: Rosalind Lucy Chambers

Notary Public
Dawson County, Georgia
My Commission Expires 1-16-22



20 JUN 12 9:15 AM



Legend
 Parcels
 Roads

Parcel ID	095 223	Owner	CHAMBERS DANIELLEN & RUSSELL C	Last 2 Sales			
Class Code	Residential			Date	Price	Reason	Qual
Taxing District	UNINCORPORATED			6/12/2018	\$23000	LM	Q
	UNINCORPORATED	Physical Address	35 IRVIN DR	3/13/2008	0	BK	U
Acres	2.61	Assessed Value	Value \$23000				

(Note: Not to be used on legal documents)

Date created: 5/7/2020
 Last Data Uploaded: 5/6/2020 11:08:25 PM

Developed by 

20 JUN 12 9:15 AM
 161-6 21 JUN 02

Printed: 5/7/2020 10:35:08 AM



Official Tax Receipt
Dawson County
 25 Justice Way, Suite 1222
 Dawsonville, GA 30534
 -Online Receipt-

Phone: (706) 344-3520
Fax: (706) 344-3522

Trans No	Property ID / District Description	Original Due	Interest & Penalty	Amount Due	Amount Paid	Transaction Balance
2019 - 2420	095 223 / 1 LL 780 781 LD 4-1 FMV: 23000	\$219.58	\$0.00 Fees: \$0.00 \$0.00	\$0.00	\$219.58	\$0.00
Totals:		\$219.58	\$0.00	\$0.00	\$219.58	\$0.00

Paid Date: 12/1/2019

Charge Amount: \$219.58

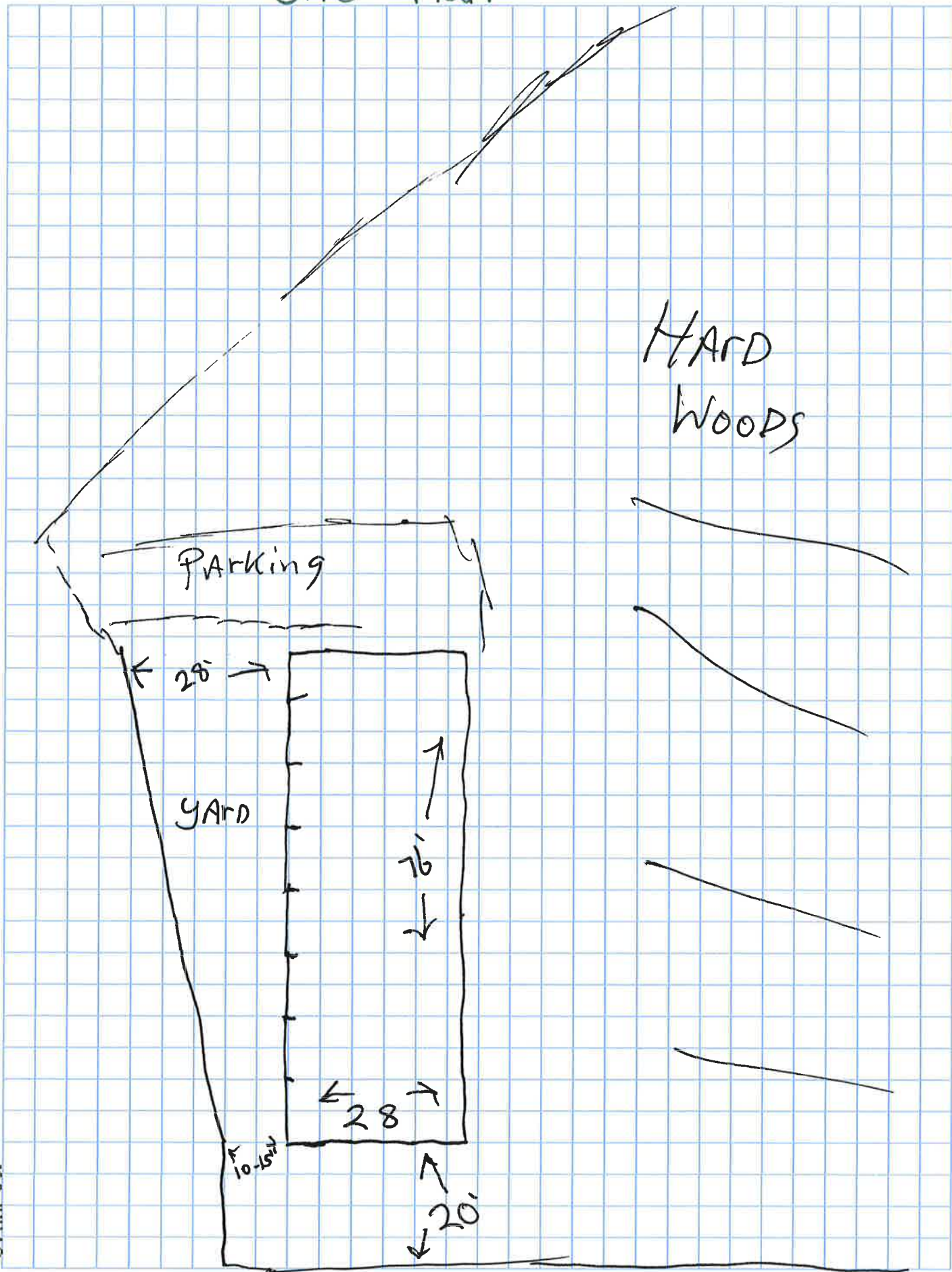
CHAMBERS DANIELLE N & RUSSELL C



Scan this code with your mobile phone to view this bill

20 JUN 12 9:15AM

Site Plan



HARD
WOODS

PARKING

YARD

28'

20'

28'

20'

10-15'

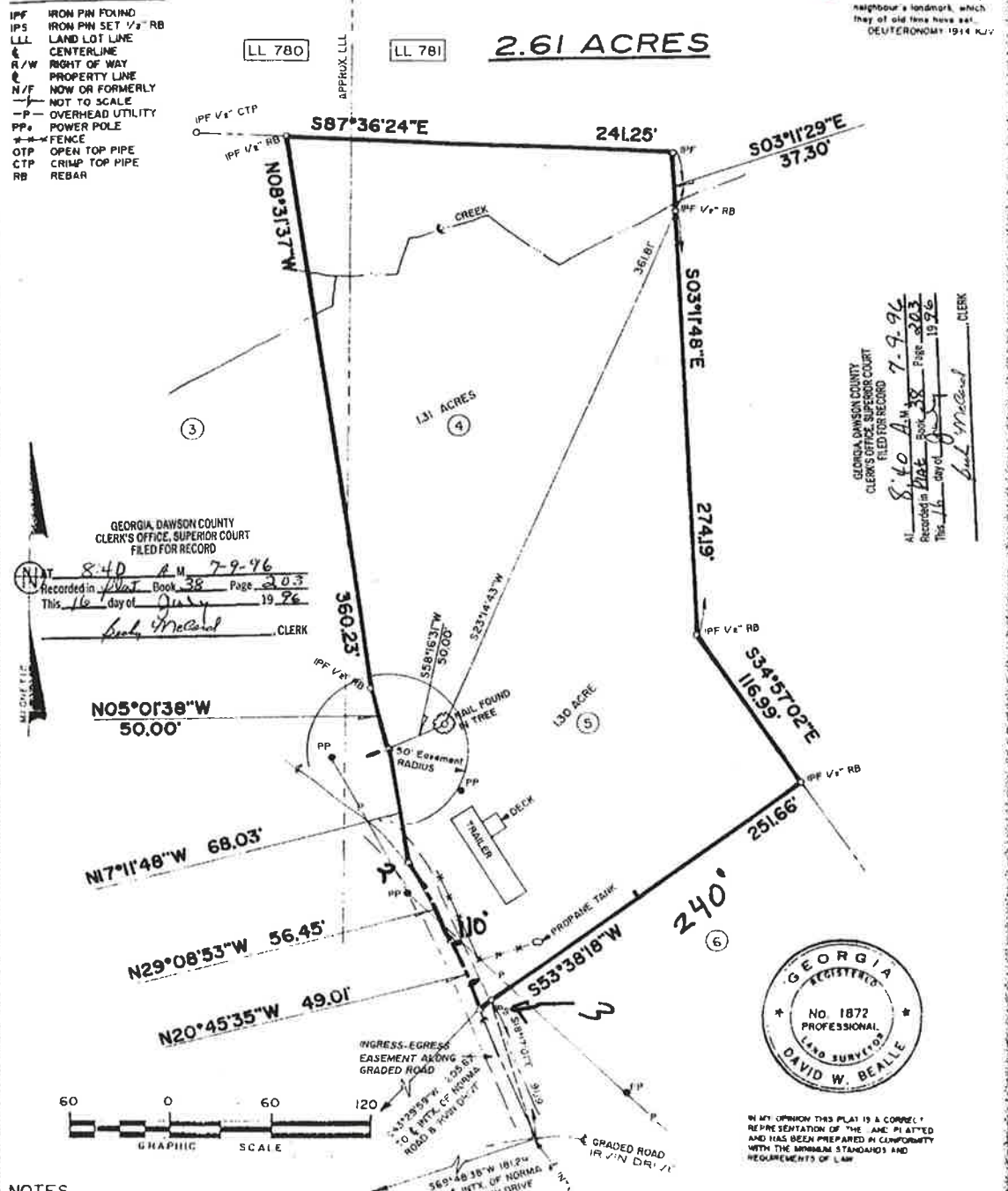
Irvin Dr.

Parcel where mobile home is being placed

LEGEND

- IPF IRON PIN FOUND
- IPS IRON PIN SET 1/2" RB
- LLL LAND LOT LINE
- C CENTERLINE
- R/W RIGHT OF WAY
- P PROPERTY LINE
- N/F NOW OR FORMERLY
- NOT TO SCALE
- P OVERHEAD UTILITY
- PP POWER POLE
- F FENCE
- OTF OPEN TOP PIPE
- CTP CRIMP TOP PIPE
- RB REBAR

Thou shalt not remove thy neighbour's landmark, which they of old time have set. DEUTERONOMY 19:14 KJV



GEORGIA, DAWSON COUNTY
CLERK'S OFFICE, SUPERIOR COURT
FILED FOR RECORD
NAT 8:40 A.M. 7-9-96
Recorded in Plat Book 38 Page 203
This 16 day of July 1996
David W. Bealle, CLERK

GEORGIA, DAWSON COUNTY
CLERK'S OFFICE, SUPERIOR COURT
FILED FOR RECORD
AL 8:40 A.M. 7-9-96
Recorded in Plat Book 38 Page 203
This 16 day of July 1996
David W. Bealle, CLERK



IN MY OPINION THIS PLAT IS A CORRECT REPRESENTATION OF THE LAND PLATTED AND HAS BEEN PREPARED IN CONFORMITY WITH THE PROGRAM STANDARDS AND REQUIREMENTS OF LAW



NOTES

1. THE FIELD DATA UPON WHICH THIS PLAT IS BASED HAS A CLOSURE PRECISION OF ONE FOOT IN 53,868 FEET AND AN AVERAGE ANGULAR ERROR OF 0 SECONDS PER ANGLE POINT, AND WAS BALANCED WITH LEAST SQUARES ADJUSTMENT.
2. ANGULAR AND LINEAR FIELD MEASUREMENTS WERE MADE WITH A TOPCON GTS-3B TOTAL STATION.
3. THIS PROPERTY IS NOT LOCATED IN A FLOOD HAZARD AREA AS SCALED FROM DAWSON COUNTY FLOOD INSURANCE RATE MAP, PANEL NO 130304 0125 A.
4. THIS PROPERTY IS SUBJECT TO ALL EASEMENTS AND RESTRICTIONS, BOTH RECORDED AND UNRECORDED.
5. THE EXTERIOR BOUNDARY OF THIS PROPERTY HAS A CLOSURE PRECISION OF ONE FOOT IN 192,780 FEET.
6. THE BEARINGS SHOWN ON THIS PLAT WERE CALCULATED FROM A RANDOM TRAVERSE USING FIELD MEASUREMENTS AND A SINGLE MAGNETIC COMPASS OBSERVATION (UNLESS ROTATED TO OTHER SURVEY OR DEED AS REFERENCED ON NORTH ARROW). BEARINGS MAY DIFFER FROM PREVIOUS SURVEYS DUE TO MAGNETIC DECLINATION AND FIELD CONDITIONS ALTHOUGH THE PROPERTY LINES ARE THE SAME, UNLESS OTHERWISE NOTED.



SURVEY FOR
Les Nichols & Julie Nichols
LAND/LOTS 780 and 781 4TH DISTRICT,
1ST SECTION,
DAWSON COUNTY, GEORGIA
DATE: 4/11/96
David Bealle Surveyors, Ltd.
2755 Antloch Road Suite 400
Cumming, Georgia 30130
SCALE: 1" = 60'
(770) 889-1770
JOB# 96162 FB 241/25F DB O DB D LD

20 JUN 12 9:16 AM

**GEORGIA DEPARTMENT OF PUBLIC HEALTH
CONSTRUCTION PERMIT AND SITE APPROVAL
For On-Site Sewage Management System**

COUNTY: Dawson	SUBDIVISION:	LOT NUMBER:	BLOCK:
PROPERTY LOCATION (ADDRESS/DIRECTIONS):			

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. 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: 06/05/2020
PROPERTY OWNER'S NAME: RUSS CHAMBERS	PHONE NUMBER:	ALTERNATE PHONE NUMBER:
PROPERTY OWNER'S ADDRESS:		
AUTHORIZED AGENT'S NAME (IF OTHER THAN OWNER):	PHONE NUMBER:	RELATIONSHIP TO OWNER:

Section A — General Information

1. REQUIRED SETBACK FROM RECEIVING BODIES (wells, lakes, sinkholes, streams, etc.) EVALUATED: (1) Yes (2) No	5. TYPE OF STRUCTURE (single/multi-family residence, commercial, restaurant, etc.): Single-Family Residence	9. SOIL SERIES (e.g. Pacolet, Orangeburg, etc.):										
2. WATER SUPPLY: (1) Public (2) Private (3) Community	6. WATER USAGE BY: Bedroom Numbers	10. PERCOLATION RATE / HYDRAULIC LOADING RATE: <table border="1"><tr><td></td><td></td><td></td><td>4</td><td>5</td></tr></table>				4	5					
			4	5								
3. SEWAGE SYSTEM TO BE PERMITTED: (1) New (2) Repair (3) Addition	7. NO. OF BEDROOMS / QPD: <table border="1"><tr><td></td><td></td><td></td><td></td><td>4</td></tr></table>					4	11. RESTRICTIVE SOIL HORIZON DEPTH (INCHES): <table border="1"><tr><td></td><td></td><td></td><td>7</td><td>2</td></tr></table>				7	2
				4								
			7	2								
4. LOT SIZE (SQUARE FEET / ACRES): <table border="1"><tr><td></td><td></td><td>4</td><td></td><td></td><td></td><td>1</td></tr></table>			4				1	8. LEVEL OF PLUMBING OUTLET: (1) Ground Level (2) Basement (3) Above ground level	12. SOIL TEST PERFORMED BY: Centofanti, Daniel L			
		4				1						

Section B — Primary / Pretreatment

1. DISPOSAL METHOD: Existing	2. GARBAGE DISPOSAL: (1) Yes (2) No	3. SEPTIC TANK CAPACITY (GALLONS): 1000	4. ATU Capacity: 0	5. DOSING TANK CAPACITY (GALLONS):	6. GREASE TRAP CAPACITY (GALLONS):
--	---	---	------------------------------	------------------------------------	------------------------------------

Section C — Secondary Treatment

1. ABSORPTION FIELD DESIGN: (1) Level Field (2) Serial (3) Drip (4) Bed (5) Distribution Box (6) Mound/Area Fill (7) Other	4. TOTAL ABSORPTION FIELD SQUARE FEET REQUIRED: <table border="1"><tr><td></td><td></td><td></td><td>1</td><td>0</td><td>0</td></tr></table>				1	0	0	7. NUMBER OF ABSORPTION TRENCHES: <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>						
			1	0	0									
2. ABSORPTION FIELD PRODUCT: Quick 4 High Capacity -16in	5. TOTAL ABSORPTION FIELD LINEAR FEET REQUIRED: <table border="1"><tr><td></td><td></td><td></td><td>6</td><td>5</td></tr></table>				6	5	8. SPECIFIED LENGTH OF ABSORPTION TRENCHES: <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>							
			6	5										
3. AGGREGATE DEPTH (Inches):	6. DEPTH OF ABSORPTION TRENCHES (range in inches): <table border="1"><tr><td></td><td>2</td><td>8</td><td>—</td><td>4</td><td>0</td></tr></table>		2	8	—	4	0	9. Distance Between Absorption Trenches: <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>						
	2	8	—	4	0									

Permit


A PERMIT IS HEREBY GRANTED TO INSTALL THE ON-SITE SEWAGE MANAGEMENT SYSTEM DESCRIBED ABOVE. THIS PERMIT IS NOT VALID UNLESS PROPERLY SIGNED BELOW. THIS PERMIT EXPIRES TWELVE (12) MONTHS FROM DATE OF ISSUANCE.

ANY GRADING, FILLING, OR OTHER LANDSCAPING SUBSEQUENT TO ISSUANCE OF A PERMIT MAY RENDER PERMIT

VOID, FAILURE TO FOLLOW SITE PLAN MAY RENDER PERMIT VOID. ANY GRADING, FILLING, OR OTHER LANDSCAPING SUBSEQUENT TO 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 LOCATING PROPER DISTANCES FROM BUILDINGS, WELLS, PROPERTY LINES, ETC.

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.

1. SITE APPROVED AS SPECIFIED ABOVE: (1) Yes (2) No

APPROVING ENVIRONMENTALIST: 	TITLE: Environmental Health Specialist IV	DATE: 06/08/2020	CONSTRUCTION PERMIT NUMBER: OSC04200807
---	---	----------------------------	---

**GEORGIA DEPARTMENT OF PUBLIC HEALTH
CONSTRUCTION PERMIT AND SITE APPROVAL
For On-Site Sewage Management System**

County: Dawson

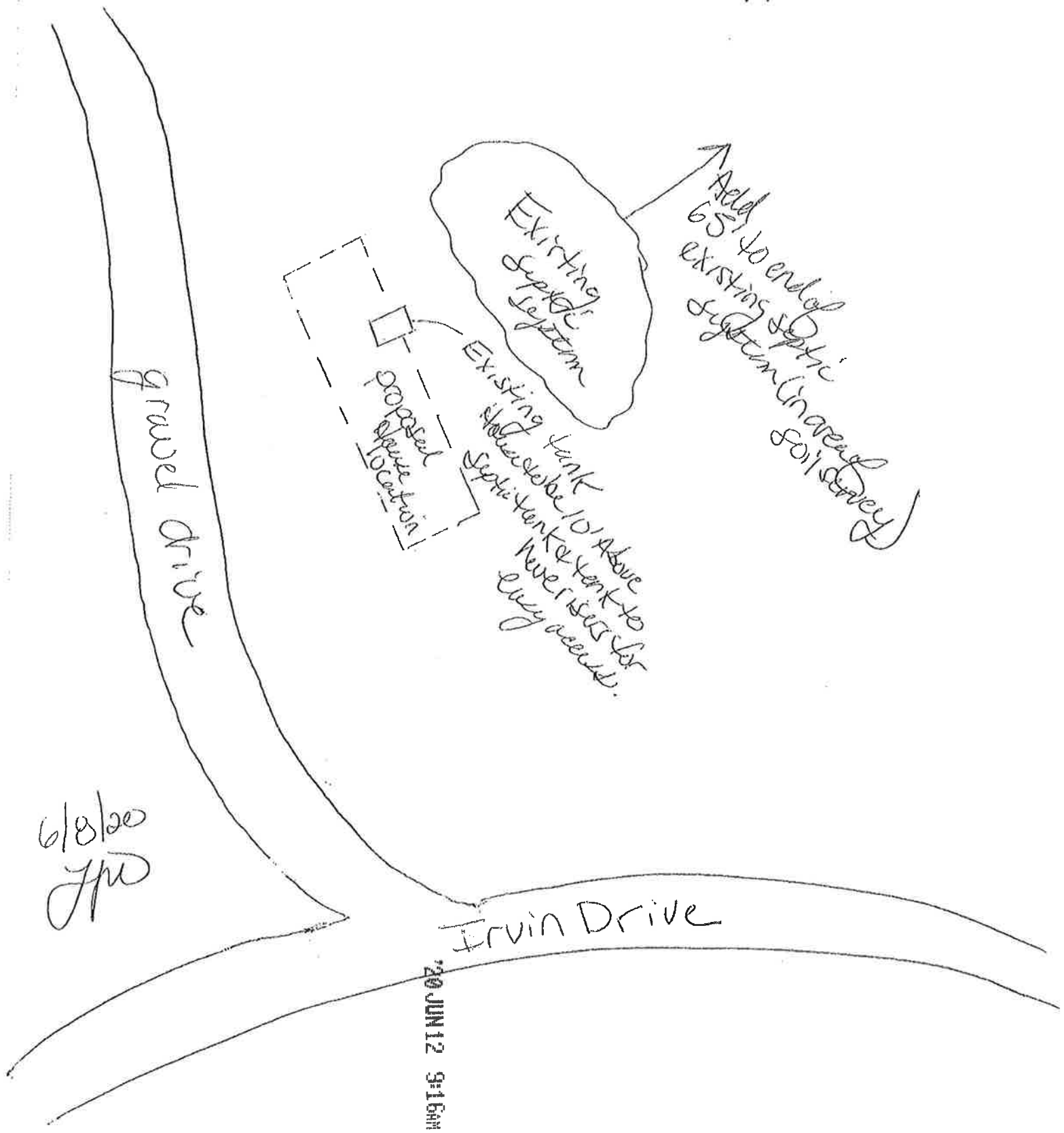
06/08/2020 9:16AM

Russ Chambers

OSC 042.00807

Add-on permit (1-bedroom)

6/8/20



Proposed location

Existing Septic System

Existing Tank
should be 10' above to
have 15' for
easy access.

Add 65' to end of
existing septic
system (in area of
soil survey)

6/8/20
JPC

20 JUN 12 9:16 AM

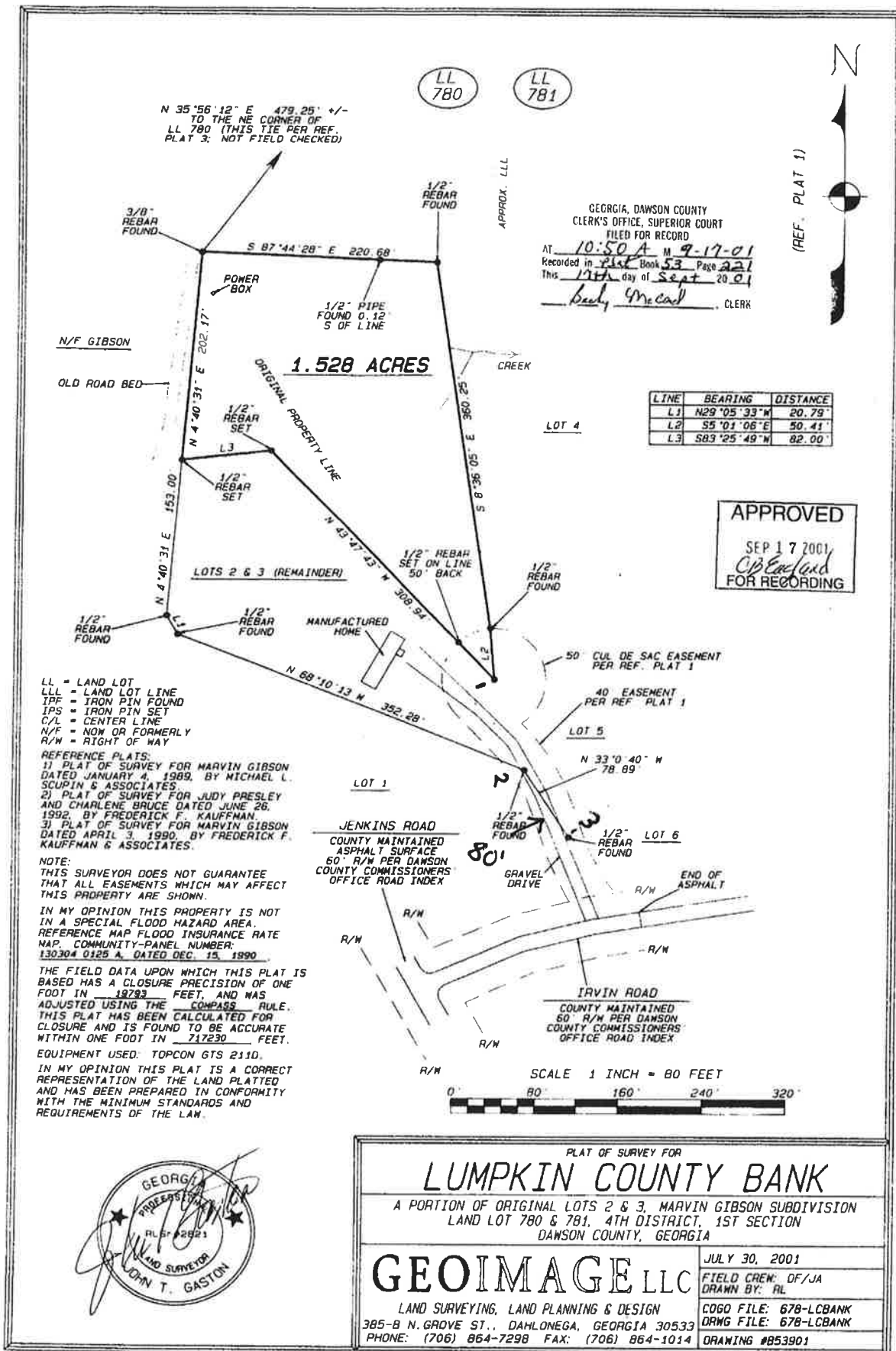
Russ Chambers

Dawsonville GA,30534

To whom it may concern,

I am requesting to place a mobile home on the same foot print as a previous mobile home. The mobile home burnt and I acquired the land. To do so the setbacks requirements have changed through the years. I am requesting a variance to 13', the set back is 40' on the front currently and my trailer will be approximately 15 from property line. I have asked for 13' to give me 2' of grace room. Please contact me with any questions.

Thank you for the consideration
Russ Chambers



PLAT OF SURVEY FOR
LUMPKIN COUNTY BANK
A PORTION OF ORIGINAL LOTS 2 & 3, MARVIN GIBSON SUBDIVISION
LAND LOT 780 & 781, 4TH DISTRICT, 1ST SECTION
DAWSON COUNTY, GEORGIA

GEOIMAGE LLC
LAND SURVEYING, LAND PLANNING & DESIGN
385-B N. GROVE ST., DAHLONEGA, GEORGIA 30533
PHONE: (706) 864-7298 FAX: (706) 864-1014

JULY 30, 2001	FIELD CREW: DF/JA
	DRAWN BY: RL
	COGO FILE: 678-LCBANK
	DRWG FILE: 678-LCBANK
	DRAWING #853901

20 JUN 12 9:16AM

Call Dawson County Environmental Health office at 706-265-2930 between 8:00a.m. and 9:00 a.m. to schedule a time for final inspection.

Septic system must be installed by a Georgia Certified Septic Tank Installer.

This permit is not valid unless properly signed by an Environmental Health Specialist; **this permit expires twelve (12) months from the date of issue.**

Notify the Environmental Health Office of any wells or springs located on the property or located within 100 feet of property lines.

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

Trash/burial pits must be reported to the Environmental Health office.

Any grading, cutting, or filling may void this permit.

If rock and/or ground water is encountered, cease installation and contact the Environmental Health office.

Easements onto other properties for the installation of septic systems shall be granted only in cases of repairing an existing system, and only when an on-site repair area is not available.

If crossing the drainfield, water lines must be installed 12" above the top of the system and encased in a single length of pipe that extends 10' beyond the drainfield.

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 Dawson County Environmental Health office upon completion of construction and before applying final cover.

Ross Chambers

6/11/2020

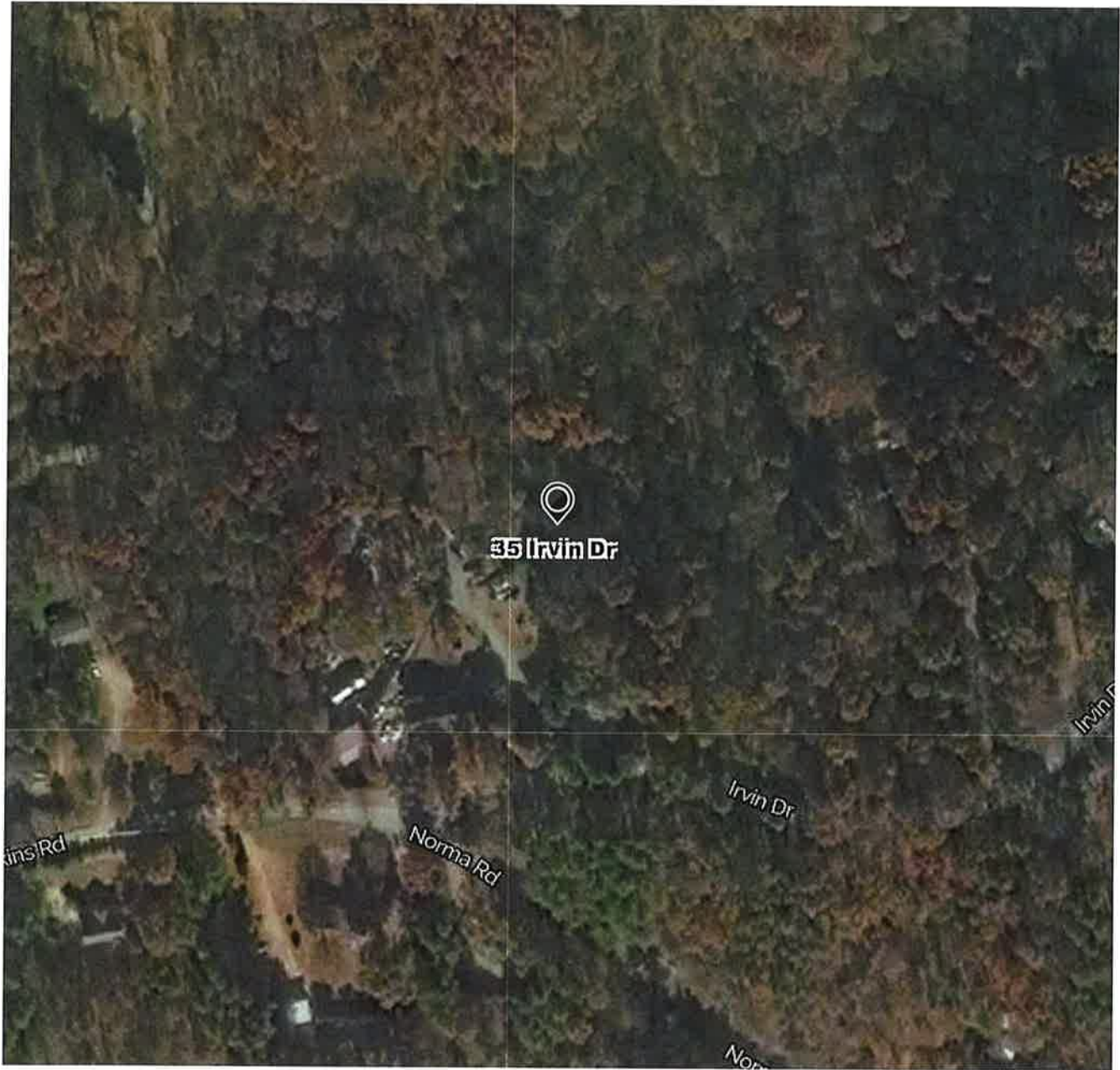
Signature -- I have read and understand all of the above

Date

9:12 AM
9:15 AM

35 Irvin Dr

Dawsonville | GA 30534-5262



20 JUN 12 9:15AM