



**TENNESSEE DEPARTMENT OF ENVIRONMENT AND CONSERVATION  
DIVISION OF WATER RESOURCES**

**PERMIT FOR CONSTRUCTION OF SUBSURFACE SEWAGE DISPOSAL SYSTEM**

|  |  |   |
|--|--|---|
| Issued to: <u>Samuel Hinson</u><br><br><b>Location:</b><br>County: <u>Maury</u><br>Address: <u>Canaan Rd-Beside 208</u><br>City: <u>Mt. Pleasant</u><br>Subdivision: _____<br>Lot #: _____<br><br>Map: <u>127</u> Group: _____ Parcel: <u>026.00</u>   | <b>Evaluation Based Upon:</b><br><input type="checkbox"/> 1. Soil Typing by Soil Scientist<br><input type="checkbox"/> a. General<br><input type="checkbox"/> b. High Intensity<br><input type="checkbox"/> c. Extra High Intensity<br><input type="checkbox"/> 2. Soil Percolation Test<br><input checked="" type="checkbox"/> 3. Environmental Scientist<br>Estimated Absorption Rate: <u>60</u> MPI   | <b>Type of System:</b><br><input checked="" type="checkbox"/> 1. Conventional<br><input type="checkbox"/> 2. Modified Conventional<br><input checked="" type="checkbox"/> 3. Conventional System Substitute<br><input checked="" type="checkbox"/> Chamber<br><input checked="" type="checkbox"/> Expanded Polystyrene<br><input checked="" type="checkbox"/> Large Diameter Gravelless<br>Pipe<br>Gravel backfill in a 24 in.<br>wide trench required? <u>No</u><br><input type="checkbox"/> 4. Low Pressure Pipe<br><input type="checkbox"/> 5. Mound<br><input type="checkbox"/> 6. Lagoon<br><input type="checkbox"/> 7. Subsurface Drip System<br><input type="checkbox"/> 8. Other: _____ |
| <b>Installation:</b><br><input checked="" type="checkbox"/> 1. New Installation<br><input type="checkbox"/> 2. Repair to Existing System<br><input type="checkbox"/> 3. System Modification<br><input type="checkbox"/> 4. Large System  | <b>Approval Based Upon: State No. T.C.A. 68-221-403</b><br><input type="checkbox"/> (c) Percolation Test<br><input type="checkbox"/> (d) Grandfather Clause - Current standards except those specified<br><input type="checkbox"/> (f) 12" (karst) and 6" (non-karst) buffer required<br><input type="checkbox"/> (m) 3 <sup>rd</sup> Party Permit Package<br><input type="checkbox"/> (i) 9" Buffer required (24"-36" total soil depth)<br><input type="checkbox"/> (k) Grandfather Clause - Meets June 30, 1990, standards (repair only)<br><input checked="" type="checkbox"/> Current Standards<br><input type="checkbox"/> Other: _____ |   |
| The system shall consist of a two-compartment septic tank holding <u>900</u> (min) gallons, with <u>330</u> linear feet in <u>5-6</u> trenches, <u>36</u> inches wide and <u>24</u> (min) to <u>30</u> (max) inches in depth. (Depth of gravel: <u>12</u> inches)<br><br><b>SIP Depth (in):</b> _____ <b>SIP Length (ft):</b> _____<br><b>SIP Comments:</b><br><b>General Comments:</b><br>Locate fieldlines to front of house in area shown |  | <b>Also Required:</b><br><input type="checkbox"/> 1. Soil Improvement Practice (SIP)<br><input type="checkbox"/> Curtain Drain<br><input type="checkbox"/> Drawdown Drain<br><input type="checkbox"/> Interceptor Drain<br><input type="checkbox"/> 2. Flow Diversion Valve<br><input type="checkbox"/> 3. Sewage Pump<br>Pump Flow Rate (gpm): _____<br>TDH (ft): _____<br><input type="checkbox"/> 4. Single Compartment Pump<br>Tank, Volume (gal): _____<br><input type="checkbox"/> 5. Other: _____  |

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

**Please see attached drawing and supporting documentation.**

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 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.**

By: Alan Floyd  
(DWR Staff)

Date: 02/12/2026  
(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 - Division of Water Resources  
**Permit for Construction of a Subsurface Sewage Disposal System**



Issued To: Samuel Hinson

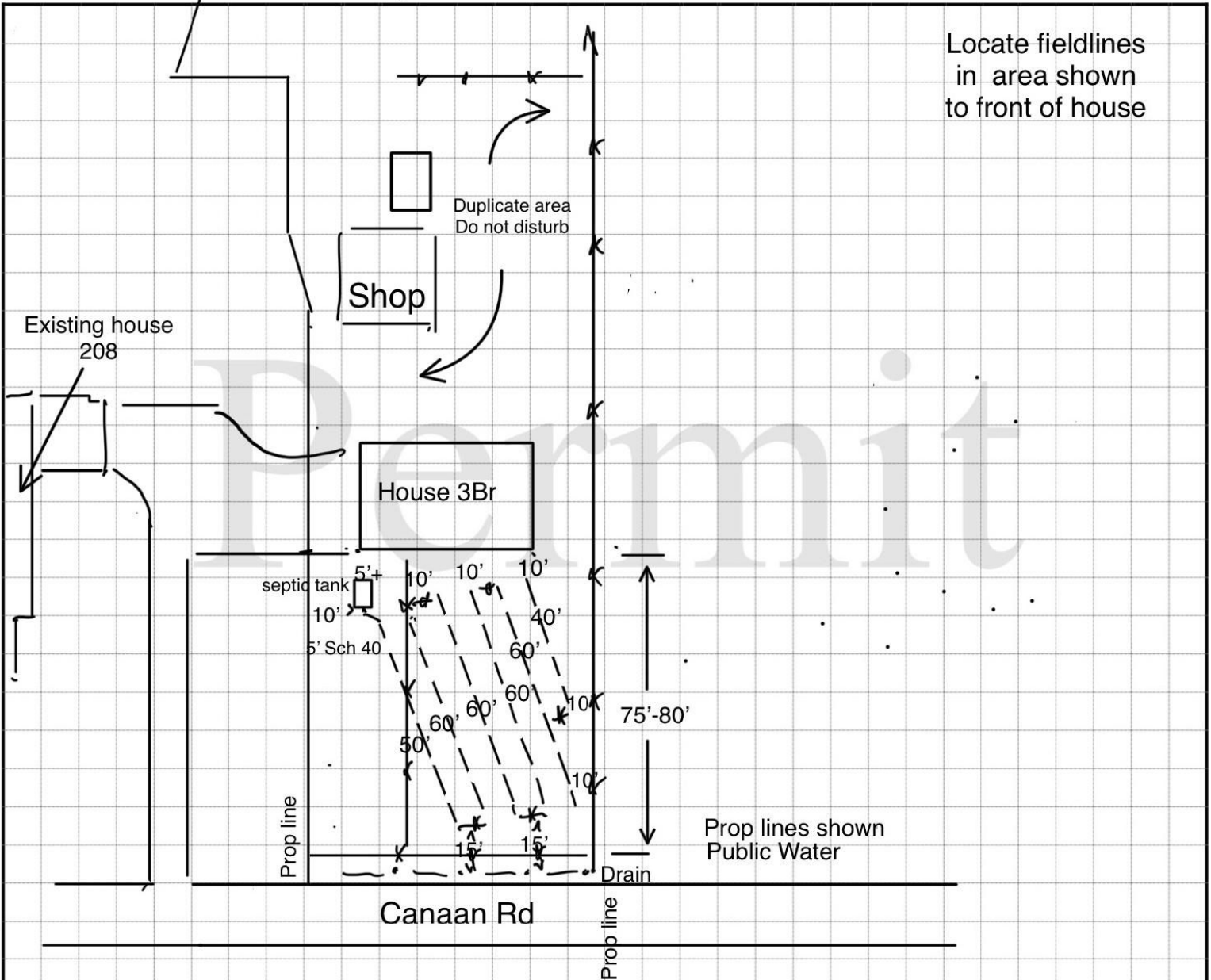
Location: Canaan Rd -Beside 208

Inspector: Alan Floyd *Alan Floyd*

Date: 2/11/26

General Notes:

- Please refer to the design specifications for the subsurface sewage disposal system on the first page of the construction permit.
- Contact the local Division of Water Resources representative to schedule a final inspection.
- All electric components (e.g., pump, alarm, etc.) for the subsurface sewage disposal system must be inspected and approved by the appropriate electrical inspector prior to requesting a final inspection. Documentation of the electrical inspection must be available during the final inspection.





TENNESSEE DEPARTMENT OF ENVIRONMENT AND CONSERVATION  
DIVISION OF WATER RESOURCES

Land-Based Systems Unit  
William R. Snodgrass – Tennessee Tower  
312 Rosa L. Parks Ave., 11th Floor  
Nashville, TN 37243-110

APPLICATION FOR WATER RESOURCES SERVICES  
APPLICANT  
COMPLETE QUESTIONS

1. Service Requested (Check Service)

Fees Due

|  |                |
|--|----------------|
| <input checked="" type="checkbox"/> Septic System Construction Permit    |                |
| <input checked="" type="checkbox"/> Dwelling                             | \$ 400.00 PAID |
| Commercial: gdp  | \$ _____       |
| System Modification  | \$ _____       |
| Repair   | \$ _____       |
| <input checked="" type="checkbox"/> Conventional Construction Inspection | \$ 100.00 PAID |
| Inspection Letter  | \$ _____       |
| Certificate of Verification  | \$ _____       |
| Water Sample   |                |
| Total Coliform   | \$ _____       |
| Fecal Coliform   | \$ _____       |
| Alternative System Permit  | \$ _____       |
| Alternative Construction Inspection                                      | \$ _____       |
| Large Conventional System Plan Review                                    | \$ _____       |
| Large Alternative System Plan Review                                     | \$ _____       |
| Experimental System Plan Review  | \$ _____       |
| Subdivision Evaluation: Lots: _____                                      | \$ _____       |
| Pumping Contractor – Septage Application                                 | \$ _____       |

2. LANDOWNER:

APPLICANT:

Site Address:

Names: Samuel Hinson Names: Marty Hebert Address: TBD Canaan Rd  
 Address: 208 Canaan Rd Address: 8670 Forks River Rd 8670 Forks  
Mt. Pleasant, Tennessee 38401 Address: River Rd Mt. Pleasant, Tennessee 38474  
 Day Phone: 6154465900 Day Phone: 6155875141  
 Original Owner: Samuel Hinson Email: marty.hebert@claytonhomes.com

3. LOCATION OF LOT OR SITE:

a) Subdivision Name: \_\_\_\_\_ Lot # 2

Property is marked and home site is approximately 30' from front property line and is a subdivided lot from 208 Canaan Rd, Mt. Pleasant TN

b) In a subdivision? Yes Give specific directions and address to the lot or site \_\_\_\_\_  
 c) Tax Map 127 Parcel 026.00

FOR SSDS PERMIT

4. ONLY: a) Size of lot 1.00 b) Number of Bedrooms 3 Bedrooms Added \_\_\_\_\_  
 c) How many occupants? \_\_\_\_\_ d) Excavated Basement? Yes \_\_\_\_\_ No X  
 e) Basement Plumbing Fixtures? Yes \_\_\_\_\_ No X  
 f) Amount of water used monthly (gallons) \_\_\_\_\_  
 g) Water Supply: Public X 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: Jeff Pack Construction

5. FOR INSPECTION LETTER ONLY AND CERTIFICATE OF VERIFICATION ONLY:

- a) Age of house \_\_\_\_\_ b) Is house vacant? \_\_\_\_\_ How long? \_\_\_\_\_  
 c) Original sewage system inspected \_\_\_\_\_  
 d) Date of previous repairs \_\_\_\_\_ Inspected \_\_\_\_\_  
 e) Is wastewater "backing up" into plumbing fixtures? \_\_\_\_\_ Surfacing on the ground? \_\_\_\_\_  
 f) All wastewater including washing machines routed into septic tank \_\_\_\_\_

6. FOR WATER SAMPLE ONLY: a) Source of Supply: Spring \_\_\_\_\_ Well \_\_\_\_\_ Other \_\_\_\_\_

- 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. I certify that the above information is true and correct to the best of my knowledge; **I have been authorized by the above name landowner** to submit this application for Environmental Services to the Division of Water Resources.

DATE: Feb 11, 2026 SIGNATURE: Marty Hebert AMOUNT PAID: 500.00 RECEIPT NUMBER: 3915416643



