



**Arkansas Department of Health**  
Environmental Health Protection

Receipt Number  
**25435858**

**Individual Onsite Wastewater System Permit Application**

Permit Type  New Installation  
 Alteration / Repair

DR Environmental ID #

7 6 0 1 0 0 9 3 4 6

Fee Schedule for Structures		√
Structures 1500 sq ft or less	\$ 30.00	<input type="checkbox"/>
Structures more than 1500 sq ft and up to 2000 sq ft	\$ 45.00	<input checked="" type="checkbox"/>
Structures more than 2000 sq ft and up to 3000 sq ft	\$ 90.00	<input type="checkbox"/>
Structures more than 3000 sq ft and up to 4000 sq ft	\$120.00	<input type="checkbox"/>
Structures more than 4000 sq ft	\$150.00	<input type="checkbox"/>
Alteration and Repair	\$ 30.00	<input type="checkbox"/>

**Part 1 Application**

Treatment Type (check one)

Disposal Method (check one)

STD = Standard Septic Tank  ATU = Aerobic Treatment Plant  STD = Standard Absorption Field  LPD = Low Pressure Distribution  
 ISF = Intermittent Sand Filter  RSF = Re-circulating Sand Filter  SUR = Surface Discharge  HLD = Holding Tank  
 PMF = Proprietary Media Filter  RGF = Re-circulating Gravel Filter  CPF = Capping Fill  SRL = Serial Distribution  
 OTH = Other (Describe)  HLD = Holding Tank  OTH = Other  DRP = Drip Irrigation

1. Owner's/Applicant's Name: Christopher & Kendra Morton  
2. Phone Number: 870-736-1661

3. Mailing Address: 1301 N. Crestview Ct., Ozark, MO 65721  
4. County: Marion

5. Address of Proposed System (If a 911 address is not available, attach detailed directions or map): 7958 MC 6061, Flippin, AR - Please refer to plat & satellite imagery.

6. Subdivision Name: N/A  
7. Approval Date: N/A  
8. Date Recorded: N/A  
9. Lot Number: N/A

10. Lot Dimensions: 445.21' x 750.4' x 775.80' x 660.54'  
11. Total Area (Acres): +/- 9.58  
12. # Bedrooms # People: 4-BR Residence  
13. Daily Flow (GPD): 450 GPD

14. Brief Legal Description of Property (Attach a separate sheet of paper, if necessary): Part of the W 1/2, SW 1/4, SE 1/4, Section 32, Town. 18 N., Range 14 W.

15. Water Supply (Specify supplier, if Public Water): Private Well  
16. GPS Coordinates: P- N36 - 09' 14.8" W92 - 29' 16.7" S - N36 - 09' 09.7" W92 - 29' 20.1"

17. Loading Rates	(gpd/ft <sup>2</sup> )	18. System Specifications					
Primary Area	0.75	a. Size of Septic Tank	1250 min.	gal	f. Trench Depth	18"	inches
Secondary Area	0.73	b. Size of Dose Tank	N/A	gal	g. Trench Spacing	10' min.	feet
Percolation Test	(min/in)	c. Absorption Area	600	ft <sup>2</sup>	h. Trench Media (List Below)		i. Trench Width
Primary Area Avg	N/A	d. Number of Field Lines	4		Pipe/Gravel		24" in
Secondary Area	N/A	e. Length of Field Lines	75 linear	ft			in

**TO THE OWNER**

The permit for construction may be deemed invalid by the local Environmental Health Specialist before the start of construction, if the site and/or soil conditions have changed after approval of this permit, or if the information within this permit is inaccurate or has been found to be misrepresented. Approval for operation does not constitute a guarantee that the system will function properly. The approval states that the system was designed and installed according to the Arkansas Department of Health, Rules and Regulations Pertaining to Onsite Wastewater Systems, unless there are exceptions or deviations noted in the comments. A Permit for Construction is valid for one (1) year from the date of approval. The authorized agent must revalidate a permit more than one (1) year old prior to the start of any construction.

**19. Utilization Verification**

I hereby attest that item 12, the number of bedrooms (number of persons for commercial) and square footage of the structure that will utilize the designed individual onsite wastewater system in this permit application, is accurate. I have reviewed the permit application and understand the layout, installation, maintenance, operation and expense(s) that may be associated with this system.

Owner/Applicant Signature: *[Signature]* Date: 9/24/2022

20. I certify that I have conducted the above tests and that the above listed information is in accordance with the latest requirements of the Arkansas Department of Health Rules and Regulations Pertaining to Onsite Wastewater Systems.

*[Signature]* Designated Representative      Soil Certified  Yes  No

Designated Representative Signature: Steven Cochran      Title:      Date: 9/21/2022      Phone Number: 870-467-5728

**21. Approval of Health Authority**

The information and specifications in the application has been reviewed and found to meet the requirements of the Arkansas Department of Health Rules and Regulations Pertaining To Onsite Wastewater Systems. A PERMIT FOR CONSTRUCTION is hereby issued.

*[Signature]* Environmental Specialist Signature      EHS Number: 999      Date: 10/05/2022

**Individual Onsite Wastewater System Permit Application**

Receipt Number <b>25435858</b>
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Continue Part 1

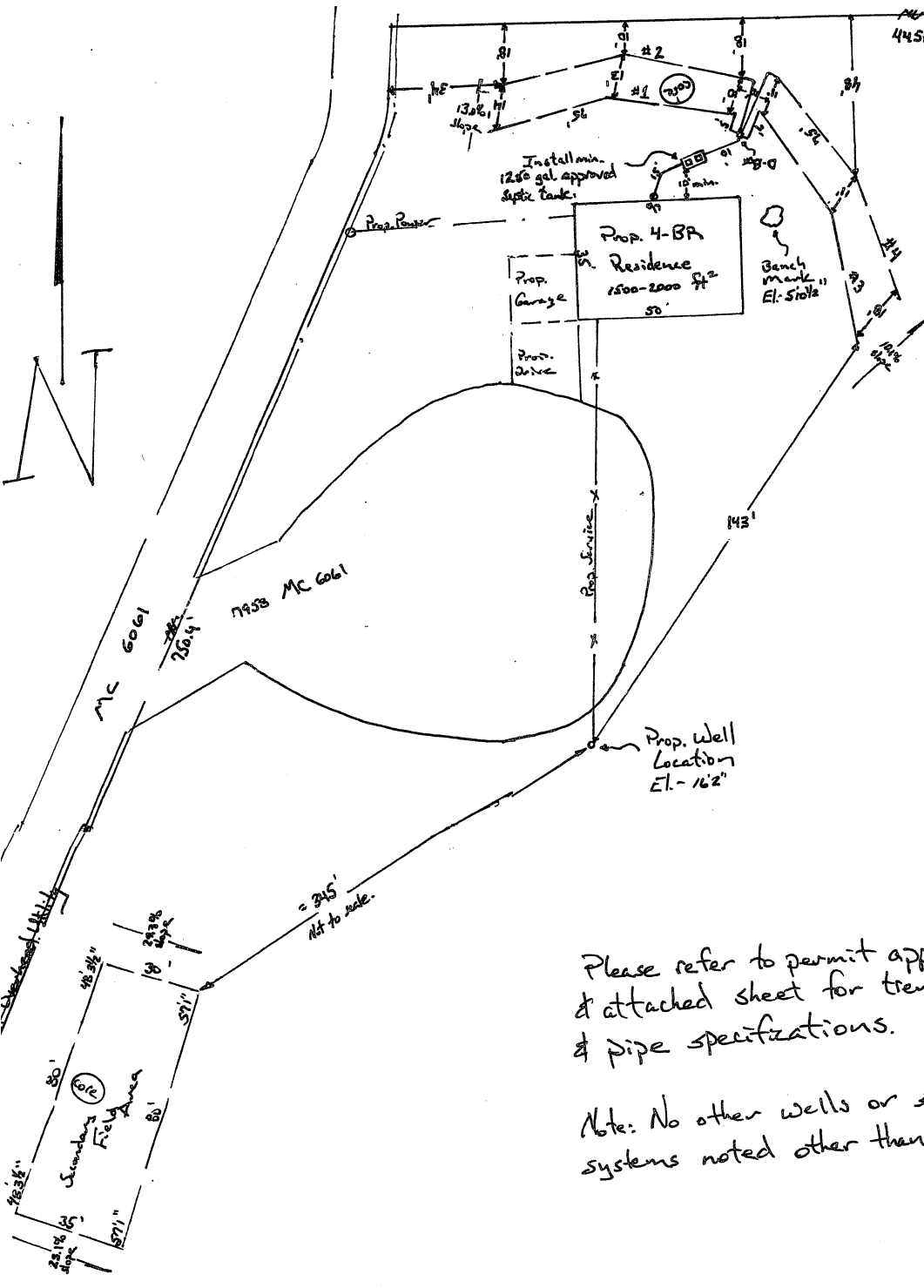
<b>22. Soil Criteria (Primary Area)</b>								Indicate the depth to items a-f, if observed in the soil (designate in inches)	
a. Bedrock	b. BSWT	c. MSWT	d. LSWT	e. Adj. MSWT	f. Adj. LSWT	g. H.C./Depth	h. Loading Rate (gpd/ft <sup>2</sup> )		
>50"	28"	37"	N/D	34"	N/A	Mod. - 37"	0.75		
<b>23. Soil Criteria (Secondary Area)</b>								Indicate the depth to items a-f, if observed in the soil (designate inches)	
a. Bedrock	b. BSWT	c. MSWT	d. LSWT	e. Adj. MSWT	f. Adj. LSWT	g. H.C./Depth	h. Loading Rate (gpd/ft <sup>2</sup> )		
>42"	22"	31"	N/D	28"	N/A	31" - Mod.	0.73		
<b>24. Seasonal Water Table (SWT) Classes Detail</b>									
<b>Primary Area</b>			List Redoximorphic Features and/or Clay Content Restrictions						
Brief	28"	in	Concen./Depletions > Chroma 3						
Moderate	37"	in	Chroma >= 3 >= 20% mass						
Long	N/D	in	N/A						
<b>Secondary Area</b>			List Redoximorphic Features and/or Clay Content Restrictions						
Brief	22"	in	Concen./Depletions > Chroma 3						
Moderate	31"	in	Chroma >= 3 >= 20% mass						
Long	N/D	in	N/A						
Comments									

**Part 2 Installation Inspection**

Septic tank manufacturer	Pump information		
Septic tank material	Trench media and width		
Dose tank manufacturer	Depth of interceptor drain		
Dose tank material	Depth of settled fill		
Name of Installer			License Number
Installation Inspected by <input type="checkbox"/> Environmental Health Specialist <input type="checkbox"/> Designated Representative (check one or installer signs System Installation Verification below)			
Signature		EHS / License Number	Date
System Installation Verification I have installed this system as designed and in compliance with all Rules and Regulations Pertaining to Onsite Wastewater Systems.			
Installer Signature		License Number	Date

**Part 3 Permit for Operation**

The information contained in Part 1 and 2 of this form has been reviewed and found to meet the requirements of the Arkansas Department of Health. THE PERMIT FOR OPERATION of this system is hereby issued.			
Environmental Health Specialist	Signature	EHS Number	Date
Comments			
Site Revalidation conducted by <input type="checkbox"/> Environmental Health Specialist <input type="checkbox"/> Designated Representative (check one)			
Signature		EHS / License Number	Date



Elevations:		Flow-Line
Ground		
So -	410 3/4"	7 1/2"
Tank In -	6 4 1/2"	7 5"
Tank Out -	6 8"	7 8"
D-Box -	7 6"	8 2"
Note: Buy (M) / (F) / (S) Smeel		
Line #1 -	8 2"	9 8"
Line #2 -	9 11 3/4"	11 5 3/4"
Line #3 -	8 2"	9 8"
Line #4 -	9 11 3/4"	11 5 3/4"

Please refer to permit application & attached sheet for trench media & pipe specifications.

Note: No other wells or septic systems noted other than shown.

Scale: 1" = 30'

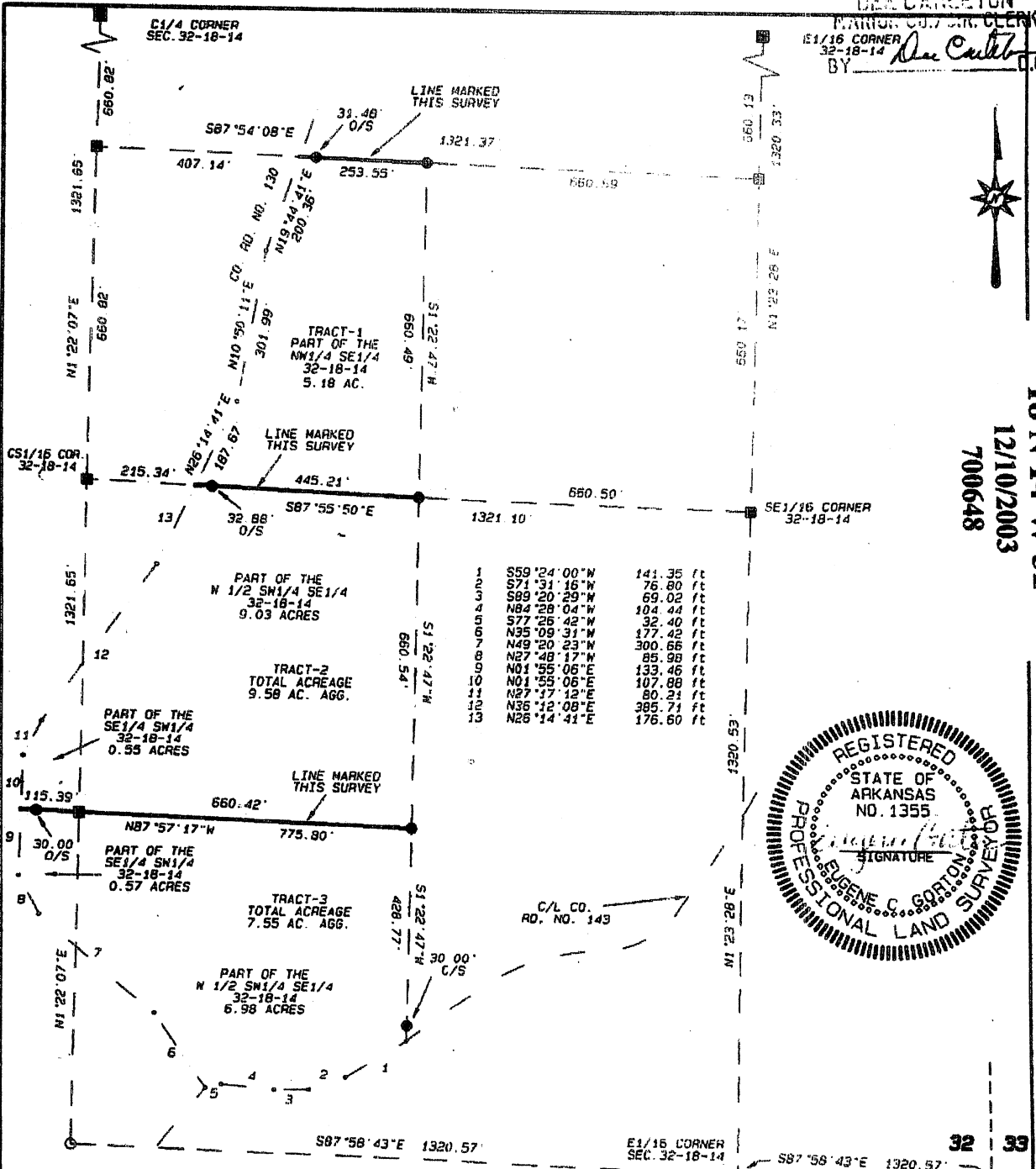
775.80'

DEE CARLETON

PLATON COUNTY CLERK  
 E1/16 CORNER  
 32-18-14  
 BY *Dee Carleton* D.C.



18 N 14 W 32  
 12/10/2003  
 700648

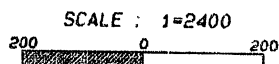


1	S59°24'00"W	141.35 ft
2	S71°31'16"W	76.80 ft
3	S85°20'29"W	69.02 ft
4	N84°28'04"W	104.44 ft
5	S77°26'42"W	32.40 ft
6	N95°09'31"W	177.42 ft
7	N49°20'23"W	300.66 ft
8	N27°48'17"W	85.98 ft
9	N01°55'06"E	133.46 ft
10	N01°55'06"E	107.88 ft
11	N27°17'12"E	80.21 ft
12	N55°12'08"E	385.71 ft
13	N28°14'41"E	176.60 ft



**SURVEYOR'S CERTIFICATION**

I EUGENE GORTON CERTIFY that, under my supervision, the above platted and described property was surveyed and the monuments set as shown, to the best of my knowledge and ability.



**NOTES**  
 BEARINGS BASED ON A SURVEY FOR JOE DILLARD DATED 5/18/90 BY CONSOLIDATED LAND SERVICES INC.

**REFERENCES**  
 SURVEY FOR JOE DILLARD DATED 5/18/90 BY CONSOLIDATED LAND SERVICES INC.

- LEGEND**
- FOUND MONUMENT, AS NOTED
  - SET 1/2" REBAR & ID CAP
  - COMPUTED POSITION
  - ▲ SET 1/2" REBAR W/ 2" ALUM ID CAP
  - ◆ STATE MONUMENT

SECTION 32  
 T 18 N R 14 W


201703136514  
**GORTON LAND SURVEYING LTD.**  
 416 E. MAIN ST., SUITE 2  
 PO BOX 2512  
 MR. VIEW, ARKANSAS 72560  
 PHONE & FAX: (870) 249-2572 // RES.: (870) 439-2480

DATE: SEPT. 1, 2003  
 PROJ. NO.: 03-075  
 FIELD BOOK: 33  
 CREWMAN: G.C.H.B.K.  
 CONTROL FILE:  
 T18N/R14W/SEC32

**SURVEY FOR:**  
**CHRIS WADE**  
 SURVEY OF PART OF THE SW & SE 1/4, SECTION 32 T 18 N R 14 W, MARION COUNTY, ARKANSAS

# **Arkansas Department of Health**

4815 West Madison Street - Little Rock, Arkansas 72205-1057 - Telephone (501) 661-2000

**Division of Environmental Health Protection  
Baxter County Office**

## **APPROVED PIPE MATERIAL**

9.10.8. Materials used in the construction of the onsite wastewater system shall meet the following requirements (New products may be approved by the Department as technology allows):

### **SOLID PIPE:**

Pipe installed from the outlet tee of the septic tank to the distribution box or diversion device shall be Schedule 40 pipe for whatever distance is required to reach undisturbed soil, but in no case shall be less than ten feet. Once a solid trench bottom is achieved the Schedule 40 pipe may be adapted to SDR 35 PVC pipe or ASTM 3034 PE (polyethylene) pipe for the remaining distance to the distribution box or diversion device. SDR 35 PVC, ASTM 3034 PE or Schedule 40 PVC shall be used from the distribution box or diversion device to the perforated field line pipe.

### **PERFORATED DRAIN PIPES:**

Perforated pipe in absorption lines shall be ASTM 2729 PVC or ASTM F-810 PE.

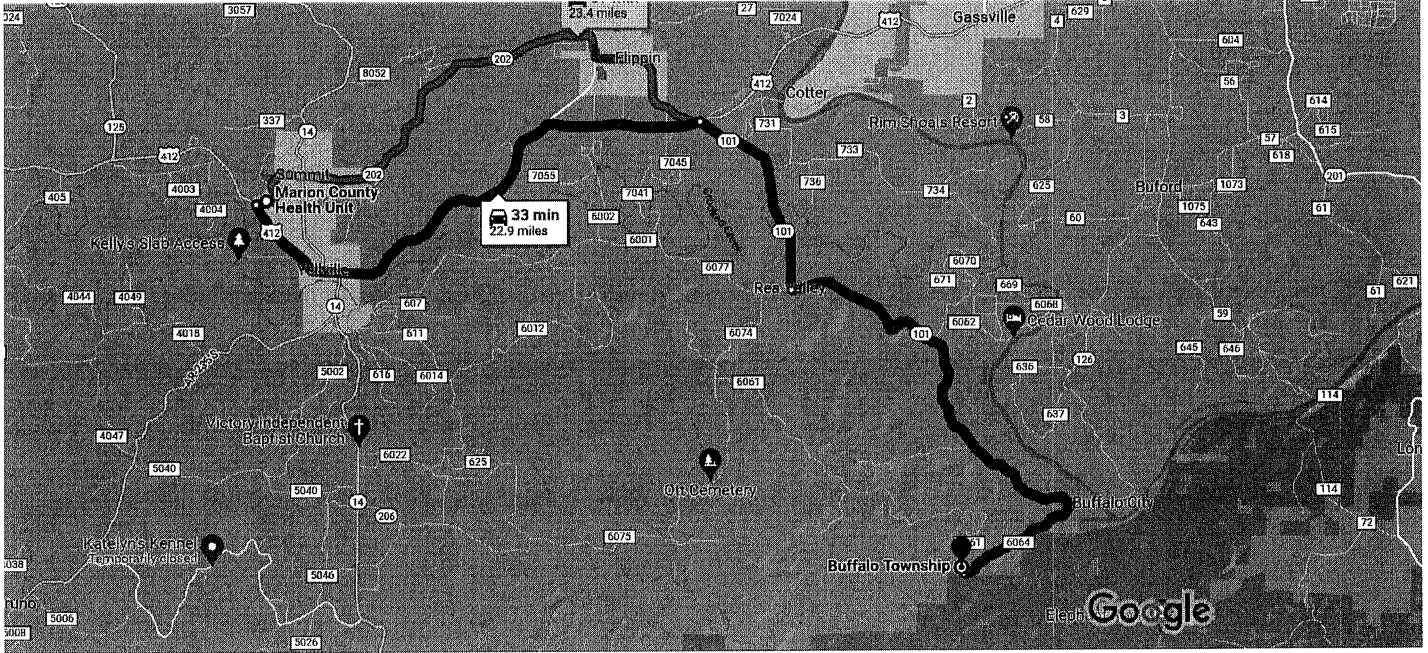
9.10.9. Any pipe under driveways, roadways, parking areas, or any area where traffic will pass over shall be constructed of Schedule 40 PVC, cast iron, or use a steel sleeve. A cleanout shall be located between the stubout and the septic tank.

9.10.10. House sewer lines shall be installed and maintained in accordance with the Arkansas State Plumbing Code.





Marion County Health Unit, 707 AR-202, Yellville, AR 72687 to Buffalo Township, Arkansas Drive 22.9 miles, 33 min



Map data ©2022 Google 2 mi

Marion County Health Unit  
707 AR-202, Yellville, AR 72687

- ↑ 1. Head west on AR-202 W toward US-412 E/US-62 E  
----- 0.2 mi
- ↶ 2. Turn left onto US-412 E/US-62 E  
📍 Pass by Arvest Bank (on the right in 1.7 mi)  
----- 9.5 mi
- ↗ 3. Slight right onto AR-101 S  
----- 3.7 mi
- ↶ 4. Turn left onto AR-101 S/Marion County 6064  
📍 Continue to follow Marion County 6064  
----- 9.5 mi
- ↘ 5. Turn right onto Marion County 6061  
📍 Destination will be on the right  
----- 0.1 mi

Buffalo Township  
Arkansas

Date: 10/3/2022



**Arkansas**  
**Department of Health**  
Keeping Your Hometown Healthy

**SEPTIC TANK PERMIT**

Customer Name: STEVEN COCHRAN

Customer No: 7601009346

Transaction Date: 10/3/2022

Transaction No: 25435858

Created By: hdandersen

Amount Received: \$45.00

Payment Method: Check No. 1221

Paid By: Steven Cochran

Owner's Name: Christopher & Kendra Morton

Site Location: 7958 MC 6061, Flippin, AR- Please refer to plat & satellite imagery

Subdivision:

Lot Number:

Designated Rep: 71 STEVEN COCHRAN

Sanitarian: Rea, Billy

**Thank you for your payment**

Marion County Health Unit - Yellville  
PO Box 129

Yellville

AR 72687