



SUBSURFACE SEWAGE DISPOSAL SYSTEM PERMIT DISCLOSURE

1 Regarding: **903 Shannon Dr** **Cookeville** **TN 38506-7132**
PROPERTY ADDRESS

2 The owner of this residential property discloses the following:

3 ☒ According to the subsurface sewage disposal system permit issued for this property, this property is permitted for 3
4 (number of) bedrooms. A copy of the permit was obtained from the appropriate governmental permitting authority and
5 is attached to this disclosure.

6 ☐ I/We have requested a copy of the subsurface sewage disposal system permit issued for this property from the
7 appropriate governmental permitting authority. However, I/we were informed that

8 ☐ The file could not be located.

9 OR

10 ☐ A permit was not issued for this property.

11 As a result, I/we do not have any knowledge as to the number of bedrooms for which this property has been permitted.

12 NOTE: There may be additional information which may be of interest and/or concern to Buyers contained in the official file
13 with the Tennessee Department of Environment and Conservation, Groundwater Protection division located in the
14 county office regulating septic systems. This file may contain information concerning maintenance that has been done
15 on the system as well as any violations imposed by the state. Buyers are encouraged to obtain this information and
16 if of concern to them, to have a soil engineer interpret the contents of the file. Real estate licensees are not soil
17 engineers and are not experts who can provide an interpretation of the contents of the official file.

18 The following parties have reviewed the information above and certify, to the best of their knowledge, that the information
19 they have provided is true and accurate and acknowledge receipt of a copy:

20 The party(ies) below have signed and acknowledge receipt of a copy.

21 BUYER

BUYER

23 _____ at _____ o'clock ☐ am/ ☐ pm

_____ at _____ o'clock ☐ am/ ☐ pm

24 Date

Date

25 The party(ies) below have signed and acknowledge receipt of a copy.

26 Shirley Yates Penny Hamrell
27 SELLER Penny Vazquez Harrell

SELLER

28 6/26/25 at 9 o'clock ☒ am/ ☐ pm

_____ at _____ o'clock ☐ am/ ☐ pm

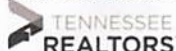
29 Date

Date

Shirley Yates Brenda Hamrell

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RF208 – Subsurface Sewage Disposal System Permit Disclosure, Page 1 of 1

Version 01/01/2025



PH. C. G. Sy B.A.

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TENNESSEE DEPARTMENT OF ENVIRONMENT AND CONSERVATION
DIVISION OF GROUND WATER PROTECTION

PERMIT FOR CONSTRUCTION OF SUBSURFACE SEWAGE DISPOSAL SYSTEM

Issued to: Chris & Jennifer Salin
Owner, Developer, Contractor, Installer, etc.

Location: Lot 2 Shannon Rd. Div
Cookeville

Installation: Lot 2 Shannon
village

() 1. New Installation

(x) 2. Repair to Existing System

Establishment:

(x) 1. Residential: # Bedrooms 3

() 2. Other: _____

(specify)

Gal/Day _____

Evaluation Based Upon:

() 1. Soil typing by Soil Scientist

() a. General

() b. High Intensity

() c. Extra High Intensity

() 2. Soil Percolation Test

() 3. Environmental Specialist

Estimated Absorption Rate N/A MPI

Type of System:

(x) 1. Conventional

() 2. Low Pressure Pipe

() 3. Mound

() 4. Lagoon

(x) 5. Large Diameter Graveless Pipe

() a. Sand backfill required

() 6. Other

Approval based upon:

Statute No. T.C.A. 68-221-403

() (c) Percolation test

() (d) Grandfather clause. Current standards except those specified

() (f) 12" (karst) and 6" (non-karst) buffer required

() (i) 9" buffer required (24"-36" total soil depth)

() (k) Grandfather clause — meets June 30, 1990 standards (repair only)

() Other Regis.

This system shall consist of a two compartment septic tank holding Existing
gallons, with 250 linear feet in 3 trenches, 36 inches
wide and 24-30 inches deep. (Depth of gravel: 12 inches)

Also required:

() 1. Soil Improvement Practice (SIP)

() 2. Flow Diversion Valve

() 3. Sewage Pump

() 4. Other: _____

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

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 being 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.

Date _____

Issued at Cookeville (Signature of Recipient)

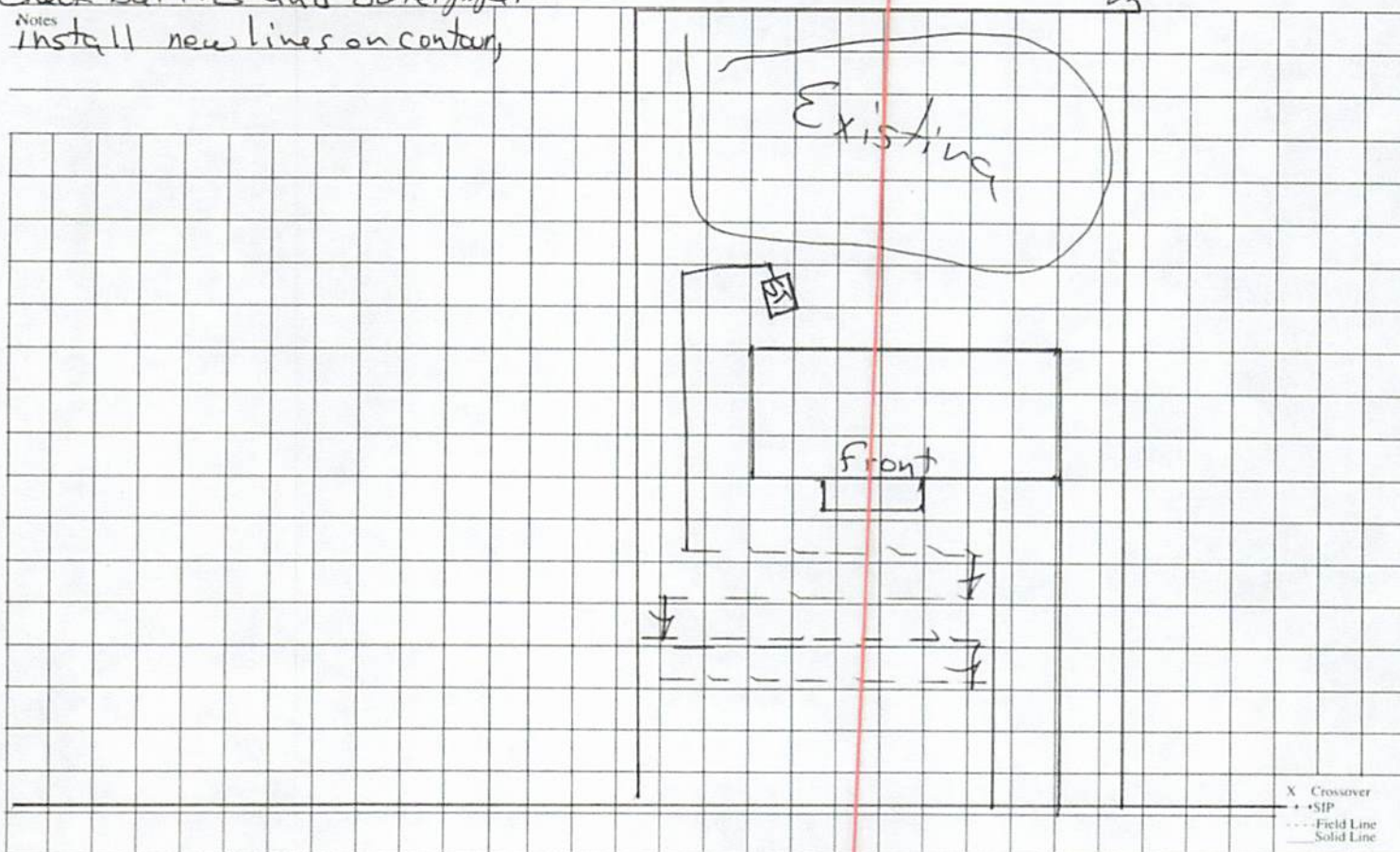
Tennessee, in Putnam County

By Dan Phillips, E.S. III
(Name and Title)

Date 10 Dec '98
(Date of Issue)

This permit is valid for 3 years from date of issue

Notes
Check baffles and outlet pipe
install new lines on contour

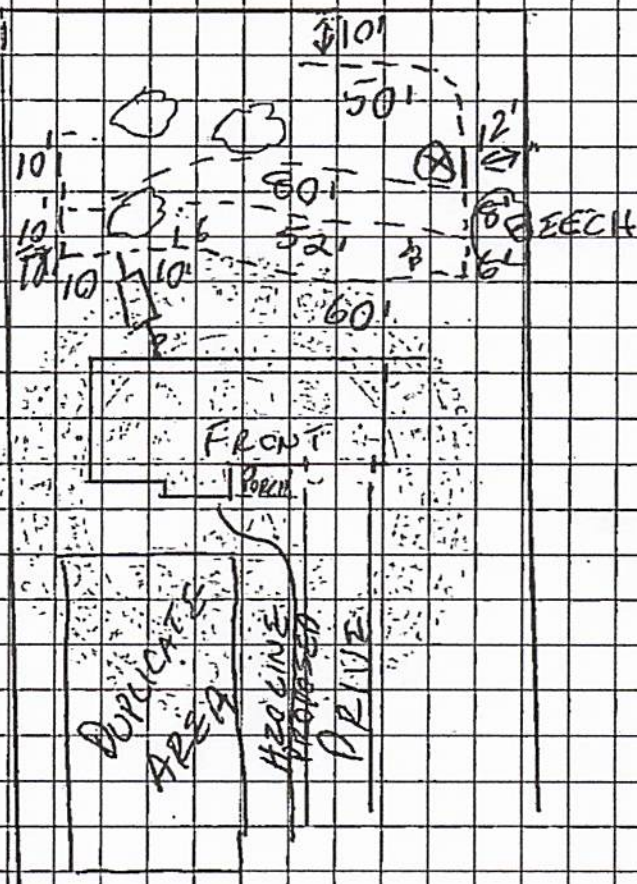


This is a permit to construct and is not intended to imply approval of any work proposed or completed on this lot.



☒ New Installation ☐ Repair ☐ Other
Installed by: Monty Johnson Const.

TOTAL 302' x 3' BY STEP



J. T. & Jimmy E. Acklun, Esq. & P. II 10/11/94
(Name and Title) (date)

LINDA Hensley

TENNESSEE DEPARTMENT OF ENVIRONMENT AND CONSERVATION
DIVISION OF GROUND WATER PROTECTION

LINDA Hensley

PERMIT FOR CONSTRUCTION OF SUBSURFACE SEWAGE DISPOSAL SYSTEM

Issued to: ELIZABETH NASH
Owner, Developer, Contractor, Installer, Etc.
Location: SHANNON RD S/D
LOT # 2

Evaluation Based Upon:
() 1. Soil typing by Soil Scientist
() a. General
() b. High Intensity
() c. Extra High Intensity
() 2. Soil Percolation Test
() 3. Environmental Specialist
Estimated Absorption Rate: 45 MPI

Type of System:
() 1. Conventional
() 2. Low Pressure Pipe
() 3. Mound
() 4. Lagoon
() 5. Large Diameter Gravelless Pipe
() a. Sand backfill required
() 6. Other

Installation:
() 1. New Installation
() 2. Repair to Existing System
Establishment:
() 1. Residential: # Bedrooms 3
() 2. Other: _____
(specify)
Gal/Day _____

Approval based upon:
Statute No. T.C.A. 68-221-403
() (c) Percolation test
() (d) Grandfather clause. Current standards except those specified
() (f) 12" (karst) and 6" (non-karst) buffer required
() (i) 9" buffer required (24"-36" total soil depth)
() (k) Grandfather clause — meets June 30, 1990 standards (repair only)
(x) Other REGULATION

This system shall consist of a two compartment septic tank holding 900/1000 gallons, with 300 linear feet in 34 trenches, 36 inches wide and 24 inches deep. (Depth of gravel: 12" inches)

Also required:
() 1. Soil Improvement Practice (SIP)
() 2. Flow Diversion Valve
() 3. Sewage Pump
() 4. Other: _____

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

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 being 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.

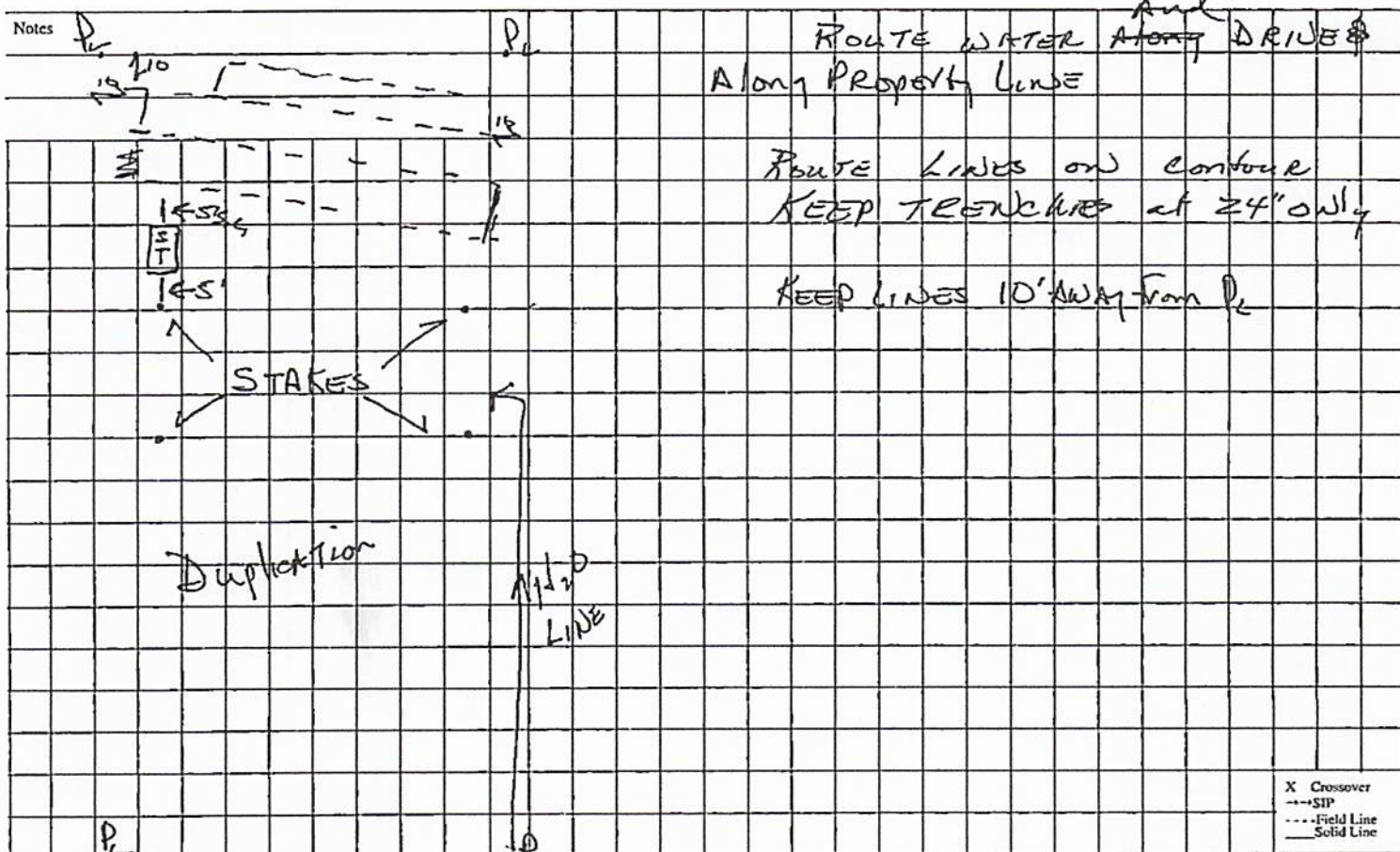
Linda Faye Nash
(Signature of Recipient)

Date _____

Issued at CKIL Tennessee, in PUTNAM County

By John Deyle Env. Spec. Date 23 AUG 74
(Name and Title) (Date of Issue)

This permit is valid for 3 years from date of issue.



X Crossover
--- SIP
--- Field Line
--- Solid Line

This is a permit to construct and is not intended to imply approval of any work proposed or completed on this lot.

Original—File
Copy—Owner



TENNESSEE DEPARTMENT OF ENVIRONMENT AND CONSERVATION APPLICATION FOR GROUND WATER PROTECTION SERVICES

JEK

1. SERVICE REQUESTED: (check service)

APPLICANT COMPLETE QUESTIONS:

FEES DUE

PTBMIS CODES V689 Code Supp/Code

<input checked="" type="checkbox"/> Septic System Construction Permit			
<input checked="" type="checkbox"/> Dwelling	2, 3, 4, 7, 8, 9	\$ 100	78064 Yes
Commercial: gpd	2, 3, 4, 7, 8, 9	\$	78064 Yes
System Modification	2, 3, 4, 7, 8, 9	\$	78064 Yes
Repair	2, 3, 4, 7, 8, 9	\$	78032
Inspection Letter	2, 3, 5, 7, 8, 9	\$	78030
Water Sample			
Total Coliform	2, 3, 6, 7, 8, 9	\$	78036 Yes
Fecal Coliform	2, 3, 6, 7, 8, 9	\$	78038 Yes
Alternative System Permit*		\$	78068
Large Conventional System Plan Review*		\$	78099
Large Alternative System Plan Review*		\$	78099
Experimental System Plan Review*		\$	78072
Subdivision Evaluation: Lots:		\$	
Soil Mapping: Type Acres		\$	Yes
Installer Permit: Type(s)		\$	78026 Yes
Pumper Permit*		\$	78028
Plat Approval - Individual Lot		\$	78029
Domestic Septage Disposal Site Permit		\$	78031

*Applicant may review these service requests with Environmental Specialist prior to processing application.

2. LANDOWNER:

APPLICANT

ORIGINAL OWNER

Names: Linda Jaye Hysley
Address: 903 Shannon Rd

Names: Linda Jaye Hysley
Address: 410 Mason Rd

Name: _____

Day Phone: 528-5449 - 526-9672

Day Phone: 528-5449 - 526-9672

3. LOCATION OF LOT OR SITE: a) In a subdivision? ☒ b) Name: Shannon Rd S.D Lot # 2 b) Non-Subdivision Give specific directions and address to the lot or site: turn onto Shannon Dr. 2nd lot on right

4. FOR SSDS PERMIT ONLY: a) Size of lot 95' X 190' b) Number of Bedrooms 3 c) How many occupants? _____ d) Excavated Basement? Yes _____ No ☒ e) Basement Plumbing Fixtures? Yes _____ No ☒ f) Amount of water used monthly (gallons) _____ g) Water Supply: Public ☒ 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: Monty Johnson

5. FOR INSPECTION LETTER ONLY: Will pick up _____ Please mail _____ a) Age of house _____ b) Is house vacant? _____ How long? _____ c) Original sewage system inspected by Health Department? _____ d) Date of previous repairs _____ Inspected _____ e) Is waste water "backing up" into plumbing fixtures? _____ Surfacing on the ground? _____ f) All waste water including washing machines routed into septic tank _____

6. FOR WATER SAMPLE ONLY: a) Source of Supply: Spring _____ Well _____ 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. MAKE A ROUGH SKETCH ON BACK OF THIS PAGE SHOWING DIRECTIONS TO PROPERTY, PROPERTY LINES, HOUSE SITE, WELL LOCATION, SPRING LOCATION, PLANNED DRIVEWAY AND UTILITIES.

8. ALL FEES DUE IN ADVANCE AND ARE NON-REFUNDABLE (except upon appeal). See Fee Schedule on reserve. Make check payable to: TREASURER, STATE OF TENNESSEE

9. I certify that the above information is true and correct to the best of my knowledge, and that I have been authorized by the above named landowner to submit this Application for Environmental Services to the Division of Ground Water Protection.

DATE: 8-22-94 SIGNATURE: Linda Jaye Hysley AMOUNT PAID: \$ 100.00 RECEIPT NUMBER: 116694

White: File Pink: Owner

FEE SCHEDULE

Evaluation for Conventional or LDGP
Septic System Permit

\$100.00 up to 1000 gpd

\$ 50.00 for each additional 1000
gpd or portion thereof

PTBMIS
SUPP/CODE

78066

Repair
Inspection Letter
Subdivision Evaluation
Water Samples:
Total Coliform
Fecal Coliform

\$None
\$100.00
\$ 20.00 per lot

78036P
78036P

Soil Mapping
Low Intensity

\$ 65.00 up to 5 acres
\$ 10.00 per acre thereafter
\$ 40.00 per acre — \$ 40.00 minimum
\$ 65.00 per acre — \$ 65.00 minimum
\$ 100.00 per acre — \$100.00 minimum

78074
78076
78078
78040
78042

General Intensity
High Intensity
Extra High Intensity
(Minimum is for each separate acre or part of
acre to be mapped)

Alternative System Application Processing

\$150.00 up to 1000 gpd
\$ 75.00 for each
additional 1000 gpm
or portion thereof

78070

Large Conventional or Large Alternative Plan Review
Experimental System Application Processing
Pumper Permit
Installer Permit

\$300.00 per proposed system
\$250.00
\$100.00
\$100.00 for conventional & LDGP
\$ 50.00 for each alternative system

78080

Plat Approval — Individual Lots

\$ 20.00 per lot

78029

Domestic Septage Disposal Site Permit

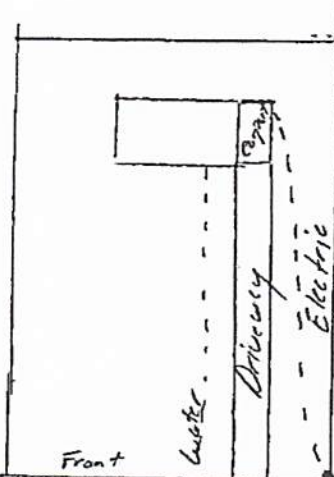
\$200.00

78031

SKETCH

Water & Electric
can be moved to
suit septic tank

Waldie North



Lot is staked
House is staked
Wash

Shannon Rd.

Official Use:

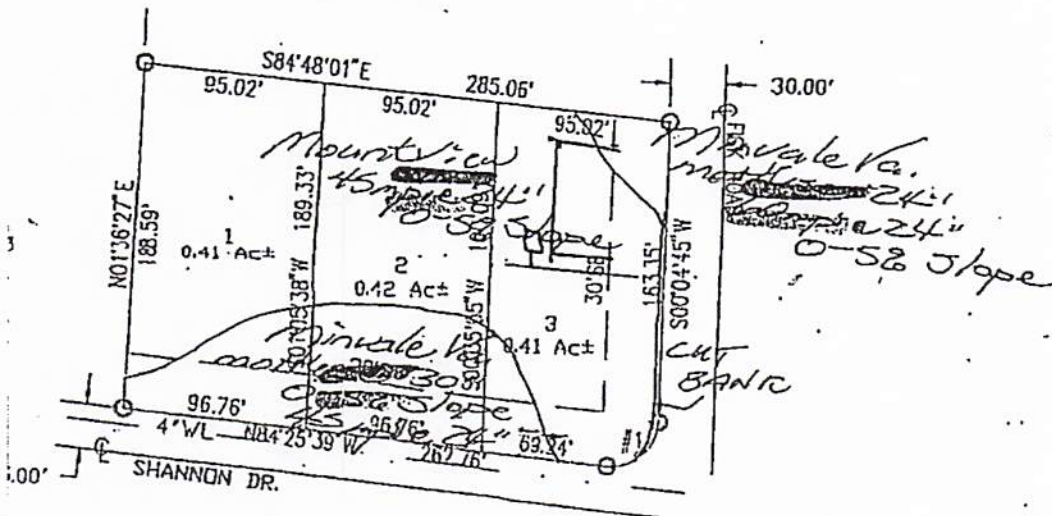
File Search

Absorption Rate _____ At Depth _____

Percolation Rate _____ At Depth _____

Other Requirements

FORD
340-687



#1
 $\Delta = 95^{\circ}29'36''$
 $R = 25.00'$
 $L = 41.67'$

BILLY HENSLEY
 15th CIVIL DISTRICT
 PUTNAM COUNTY, TN
 SCALE: 1"=100' DATE: 6/21/94
 TOTAL ACRES: 1.24 Ac±
 BY: THAXTON & BARTLETT
 229 E. SPRING STREET
 COOKEVILLE, TN 38501
 8681 A1

for Larry "no water lines"



OCF

100

TENNESSEE DEPARTMENT OF ENVIRONMENT AND CONSERVATION
APPLICATION FOR GROUND WATER PROTECTION SERVICES

1. SERVICE REQUESTED: (check service)	APPLICANT COMPLETE QUESTIONS:	FEES DUE	PTBMS CODES V689 Code Supp/Code
<input type="checkbox"/> Septic System Construction Permit			
<input type="checkbox"/> Dwelling.....	2, 3, 4, 7, 8, 9	\$	78064 Yes
<input type="checkbox"/> Commercial: gpd.....	2, 3, 4, 7, 8, 9	\$	78064 Yes
<input type="checkbox"/> System Modification.....	2, 3, 4, 7, 8, 9	\$	78064 Yes
<input checked="" type="checkbox"/> Repair.....	2, 3, 4, 7, 8, 9	\$	78032
<input type="checkbox"/> Inspection Letter.....	2, 3, 5, 7, 8, 9	\$	78030
<input type="checkbox"/> Water Sample			
<input type="checkbox"/> Total Coliform.....	2, 3, 6, 7, 8, 9	\$	78036 Yes
<input type="checkbox"/> Fecal Coliform.....	2, 3, 6, 7, 8, 9	\$	78038 Yes
<input type="checkbox"/> Alternative System Permit*		\$	78068
<input type="checkbox"/> Large Conventional System Plan Review*		\$	78099
<input type="checkbox"/> Large Alternative System Plan Review*		\$	78099
<input type="checkbox"/> Experimental System Plan Review*		\$	78072
<input type="checkbox"/> Subdivision Evaluation: Lots:.....		\$	
<input type="checkbox"/> Soil Mapping: Type..... Acres.....		\$	Yes
<input type="checkbox"/> Installer Permit: Type(s).....		\$	78026 Yes
<input type="checkbox"/> Pumper Permit*		\$	78028
<input type="checkbox"/> Plat Approval — Individual Lot.....		\$	78029
<input type="checkbox"/> Domestic Septage Disposal Site Permit.....		\$	78031

*Applicant may review these service requests with Environmental Specialist prior to processing application.

2. LANDOWNER: APPLICANT ORIGINAL OWNER
Names: Christ Jewell Saling Name: _____
Address: 903 Shannon Drive Address: _____
Cookeville TN 38506
Day Phone: 520-1529 Day Phone: _____

3. LOCATION OF LOT OR SITE: a) In a subdivision? _____ b) Name: _____ Lot # _____
b) Non-Subdivision ☒ Give specific directions and address to the lot or site: Backroad Fisk Rd to 4-way stop at

4. FOR SSDS PERMIT ONLY: a) Size of lot _____ b) Number of Bedrooms 3
c) How many occupants? 4 d) Excavated Basement? Yes _____ No ☒
e) Basement Plumbing Fixtures? Yes _____ No ☒
f) Amount of water used monthly (gallons) _____
g) Water Supply: Public ☒ Well _____ Spring _____
h) Is the lot staked? _____ If not, date it will be staked: _____
Is the house staked? _____ If not, date it will be staked: _____
i) Installer, if known: Mouty Johnson

Fisk & Shag go straight 1 mile on left - and house on right
(Greg with Almond

5. FOR INSPECTION LETTER ONLY: Will pick up _____ Please mail _____
a) Age of house _____ b) Is house vacant? _____ How long? _____
c) Original sewage system inspected by Health Department? _____
d) Date of previous repairs _____ Inspected _____
e) Is waste water "backing up" into plumbing fixtures? _____ Surfacing on the ground? _____
f) All waste water including washing machines routed into septic tank _____

6. FOR WATER SAMPLE ONLY: a) Source of Supply: Spring _____ Well _____
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. MAKE A ROUGH SKETCH ON BACK OF THIS PAGE SHOWING DIRECTIONS TO PROPERTY, PROPERTY LINES, HOUSE SITE, WELL LOCATION, SPRING LOCATION, PLANNED DRIVEWAY AND UTILITIES.

8. ALL FEES DUE IN ADVANCE AND ARE NON-REFUNDABLE (except upon appeal). See Fee Schedule on reverse. Make check payable to: TREASURER, STATE OF TENNESSEE

9. I certify that the above information is true and correct to the best of my knowledge, and that I have been authorized by the above named landowner to submit this Application for Environmental Services to the Division of Ground Water Protection.

DATE: _____ SIGNATURE: Christ Jewell Saling AMOUNT PAID: \$ _____ RECEIPT NUMBER: _____

White: File

Canary: Owner