



## **Charlton County Board of Commissioners**

# **Request for Proposals**

### **Installation of Septic System at Traders Hill**

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ACCEPTANCE DATE: Prior to 4:00 p.m. on November 3<sup>rd</sup>, 2021 "Local Time"

RFP NUMBER: FY2021-1103B

ACCEPTANCE PLACE  
Charlton County Board of Commission  
Office of the Administrator  
68 Kingsland Drive, Suite B  
Folkston, Georgia 31537

QUESTIONS regarding this Invitation to Bid shall be received no later than 4:00 PM on Friday, October 30<sup>th</sup>, 2021.

BID OPENING shall be held in the Commission Office, at the above referenced address.

REQUESTS FOR INFORMATION related to this Solicitation should be directed to:  
Hampton Raulerson  
County Administrator  
Phone: (912) 496-2549  
Fax: (912) 496-1156  
E-mail address: [hraulerson@charltoncountyga.gov](mailto:hraulerson@charltoncountyga.gov)

This document can be downloaded from our website: [www.charltoncountyga.us](http://www.charltoncountyga.us)

Issue Date: Wednesday, October 6, 2021

**Charlton County Board of Commissioners**  
**68 Kingsland Drive**  
**Folkston, GA 31537**  
**Request for Proposals (RFP) #FY2021-1103B**  
**Installation of Septic System at Traders Hill**

Sealed proposals will be received in the office of the County Administrator, Charlton County Board of Commissioners (CCBOC), Suite B, 68 Kingsland Drive, Folkston, GA. 31537, until 4:00 p.m. on November 3<sup>rd</sup>, 2021 for repairs and renovations to the Traders Hill Plumbing system. Please see the RFP documents for full specifications. There will be a pre-bid meeting at the location on October 25<sup>th</sup> at 9:00am.

At that time, date, and place given above, Suite B, the sealed bids will be publicly opened and read aloud. Specifications and bid forms are included in this solicitation and can be obtained from the Office of the County Administrator.

Questions regarding this RFP should be directed to Mr. Hampton Raulerson, County Administrator via Email at [hraulerson@charltoncountyga.gov](mailto:hraulerson@charltoncountyga.gov) and shall be received no later than 4:00 PM on Friday, October 30<sup>th</sup>, 2021. The CCBOC reserves the right to cancel this solicitation and/or reject all proposals in whole or in part if Charlton County determines that cancellation and/or rejections are advantageous to the County. Proposals are legal and binding upon the Bidder when submitted. It will also be the responsibility of each Bidder to obtain any addenda issued from the County Administrator. The written RFP documents supersede any verbal or written prior communications between the parties.

By Charlton County Board of Commissioners

Hampton Raulerson  
County Administrator

**Charlton County Board of Commissioners  
Request for Proposals**

**General Instructions for Bidders**

1. DEFINITIONS:

- a. Addendum: A change, addition, alteration, correction, or revision to a bid or contract document.
- b. Bid Schedule/Form: The form in which the response is submitted by a bidder for an invitation for bid.
- c. Contractor: The Party in a contract responsible for performing the service defined in the contract.
- d. Request for Proposal: All documents, whether attached or incorporated by reference, used to solicit competitive sealed proposals.
- e. Responsive Bidder: A person who has submitted a bid that conforms to all material respects to the invitation for proposals.
- f. Responsible Bidder: A person who has the capacity in all respects, to perform the contract requirements fully and the moral and business integrity and reliability to assure good faith performance.
- g. Qualified Vendor: One who meets, or by the date of bid acceptance can meet, all requirements for licensing, insurance and service contained within these specifications.

2. SUBMISSION OF PROPOSALS:

- a. Bid shall be enclosed in a sealed envelope, addressed to the Charlton County Board of Commission – County Administrator, Suite B, 68 Kingsland Drive, Folkston, GA 31537 with the name of the bidder, the date and hour of opening and the invitation to bid number on the face of the envelope. Emailed/faxed bids will not be considered. Any addenda should be signed and enclosed in the sealed envelope.
- b. CCBOC will be accepting one (1) unbound original of the complete signed proposal. **Pursuant to Georgia law, no bids will be considered without an executed E-Verify affidavit.** Copies may be delivered to the above address ONLY between the hours of 8:00AM and 5:00PM EST, Monday through Friday, excluding holidays observed by the Charlton County Government. For a complete listing of holidays, please contact the Office of the Administrator by phone at (912) 496-2549 or by email at [jnobles@charltoncountyga.gov](mailto:jnobles@charltoncountyga.gov).

3. SIGNATURE REQUIRED:

- a. Each bidder shall furnish all information required by the proposal form or document. Each bidder shall sign the proposal and print or type his or her name on the schedule. The person signing the bid must initial erasures or other changes. An authorized agent of the company must sign bids. A VALID PROPOSAL OFFER MUST BE SIGNED.

4. OFFER DUE DATE, TIME, AND LOCATION:

Bids must be in the actual possession of the Charlton County Board of Commission on or prior to 4:00 p.m. on November 3<sup>rd</sup>, 2021, at which time they will be publicly opened and read aloud in the Commission Chambers of the Charlton County Annex, 68 Kingsland Drive, Folkston, GA 31537.

5. DRIVING DIRECTIONS:

**Charlton County Annex from I-95:** Take I-95 South to Georgia Highway 40, if coming from the North. If coming from the South, take I-95 North to Georgia Highway 40; or exit 3. Take Georgia Highway 40 West and drive 25 miles. Charlton County Annex will be on the left at the dead end.

**Address: 68 Kingsland Drive Suite B, Folkston GA 31537**

6. LATE OFFERS:

Charlton County will not be responsible for late receipt of proposals.

7. REJECTION OF PROPOSALS/CANCELLATION:

Charlton County Government reserves the right to reject any and all submittals and reserves the right to waive any irregularities or informalities in any submittal or in the submittal procedure, when to do so would be to the advantage of Charlton County. Charlton County reserves the right to cancel this RFP at any time.

Charlton County has the right to reject all bids or proposals or any bid or proposal that is non-responsive or not responsible, and

Charlton County may issue change orders altering the original scope of work to address changes or unforeseen conditions necessary for the project completion.

8. MINIMUM RFP ACCEPTANCE PERIOD:

Submittals shall be valid and may not be withdrawn for a period of 90 days from the date specified for receipt of submittals.

9. SOLICITATION CONTACT PERSON:

Procurement Procedure – Mr. Hampton Raulerson, County Administrator at (912) 496-2549. Direct all questions, in writing, to [hraulerson@charltoncountyga.gov](mailto:hraulerson@charltoncountyga.gov).

10. QUESTIONS:

Any explanation desired by a bidder regarding the meaning or interpretation of the invitation for bids, drawings, specifications, etc. must be requested five (5) days prior to bid opening, unless otherwise specified, in order for a reply to reach all bidders before the close of bid. Any information given to a prospective bidder concerning an invitation for bid will be furnished to all prospective bidders as an addendum to the invitation if such information is necessary or if the lack of such information would be prejudicial to uninformed bidders. The written proposal documents supersede any verbal or written communications between parties. **Receipt of addendum should be acknowledged in the proposal. Although the County Administrator will take effort to send any addendum to known bidders, it is the bidder's ultimate responsibility to ensure that they have all applicable addenda prior to proposal submittal.** This may be accomplished via contact with the County Clerk prior to bid submittal or checking the county website at [www.charltoncountyga.us](http://www.charltoncountyga.us) prior to bid submittal.

11. EVALUATION AND AWARD CRITERIA:

- a. Award will be made to the lowest responsive and responsible bidder. The quality of the articles to be supplied, their conformity with the specifications, their suitability to the requirements of the County, and the delivery terms will be taken into consideration in making the award. The County may make such investigations as it deems necessary to determine the ability of the bidder to perform, and the bidder shall furnish to the County all such information and data for this purpose as the County may request. The County reserves the right to reject any bid if the evidence submitted by, or investigation of such bidder fails to satisfy the County that such bidder is properly qualified to carry out the obligations of the contract.
- b. The County reserves the right to make an award as deemed in its best interest, which may include awarding a bid to a single bidder or multiple bidders; or to award the whole bid, only part of the bid, or none of the bid to single or multiple bidders, based on its sole discretion of its best interest.

12. ALTERATIONS OF SOLICITATION AND ASSOCIATED DOCUMENTS:

Alterations of County documents are strictly prohibited and will result in automatic disqualification of the bidder's solicitation response. If there are "exceptions" or comments to any of the solicitation requirements or other language, then the supplier may make notes to those areas, but may not materially alter any document language.

13. DESCRIPTION OF MATERIALS:

Bids for materials, supplies, vehicles, and/or equipment should be accompanied by copies of detailed factory specifications, ratings, technical data, including accurate descriptions of the exact materials, supplies, vehicles, and/or equipment on which bids are made.

14. QUALITY:

All materials used for the manufacture or construction of any supplies, materials, vehicles, or equipment covered by this bid shall be new (unless otherwise specified), the latest model, of the best quality, and highest-grade workmanship. Vehicles and/or equipment shall be equipped with such necessary equipment complying with the Georgia State Law, but not including licensing. In addition, materials must comply with all applicable Federal and State OSHA requirements in affect at the time of bid.

15. GUARANTEE:

Unless otherwise specified by the County, the bidder shall unconditionally guarantee the materials and workmanship on all material and/or services. If, within the guarantee period any defects are due to faulty material and or services, the bidder at his or her expense, shall repair or adjust the condition, or replace the material and/or services to the complete satisfaction of the County. These repairs, replacement or adjustments shall be made only at such time as will be least detrimental to the operations of County business.

16. LOCAL BUSINESS INTIATIVE AFFIDAVIT:

If a Local Vendor's bid shall meet all specifications and is within five percent of the lowest responsive bid, then the Board of Commissioners may consider the fact that the bidder is a local vendor in making the bid award.

A "local vendor" for purposes of this section shall be defined as a vendor maintaining a physical presence within Charlton County, including, but not limited to the maintenance of one office within Charlton County and the continuous employment of not fewer than one person at such office for more than six months and hold a business license within Charlton County or the appropriate state license prior to the submission of such bid. The mere maintenance of a post office box within Charlton County shall not qualify a vendor as "local" for purposes of this policy.

This preference shall not apply to road construction or public works construction governed by Georgia Law O.C.G.A. § 36-91-1 et seq. or to the purchase of any other goods and/or services for which such preference is prohibited by Georgia Law.

Please send all invoices to:

THE CHARLTON COUNTY BOARD OF COMMISSION  
OFFICE OF THE COUNTY ADMINISTRATOR  
68 KINGSLAND DRIVE, SUITE B  
FOLKSTON, GA 31537

Proposals shall be mailed or delivered to:

THE CHARLTON COUNTY BOARD OF COMMISSIONERS  
OFFICE OF THE COUNTY ADMINISTRATOR  
68 KINGSLAND DRIVE, SUITE B  
FOLKSTON, GA 31537

# **Charlton County Board of Commission**

## **Request for Proposals**

### **Work Scope/Specifications**

#### **Installation of Septic System at Traders Hill**

##### **1. DESCRIPTION OF PROPOSAL**

The Contractor shall provide all necessary labor and materials to accomplish the following items.

- a. Removal of the current septic system.
- b. Work with Georgia Department of Public Health in order to design and install the permitted system. This system will consist of four (4) one thousand (1000) gallon tanks and two (2) drainfields.
- c. Installation of new 6" sewage lines with fifteen (15) sewage taps.
- d. See the attached permits for more information.

##### **2. PROPOSED COST AND WORK SCHEDULE**

- a. Each bidder shall furnish all information required by the proposal form or document. Each bidder shall sign the proposal and print or type his or her name on the schedule. The person signing the proposal must initial erasures or other changes. An authorized agent of the company must sign bids. A VALID PROPOSAL OFFER MUST BE SIGNED.

##### **3. PROVIDE MANDATORY DOCUMENTS**

- a. See Proposal Response Schedule, Local Business Affidavit of Eligibility, and the Bidder's Certificate and Statement of Non-Collusion

(END OF WORK SCOPE)



# Charlton County Board of Commission

## Request for Proposal

### Proposal Schedule

Please use this Proposal Response Form to indicate the cost for this project. Your total cost must include ALL fees, travel, and any other costs needed to complete the project.

I certify that the amount PROPOSAL is accurate and reflects any applicable discounts, and that the company, which I represent, will deliver the services and related items for the proposal amount.

By submission of this PROPOSAL, I also certify that the BIDDER has read and understands all of the requirements contained in this solicitation and agrees to be bound by all the terms and conditions contained in this solicitation without exception.

We have included all required documents required per the Bidder's Instructions and Specifications.

The BIDDER has availed itself of every opportunity to understand the requirements of this solicitation. Therefore, the undersigned respectfully submits this PROPOSAL and any attachments, if required.

OCCUPATIONAL TAX LICENSE#/COUNTY \_\_\_\_\_  
FEDERAL TAX ID# \_\_\_\_\_

**INDICATE LEGAL FORM OF BIDDER:**

Corporation \_\_\_\_\_ Partnership \_\_\_\_\_ Individual \_\_\_\_\_ Other (specify) \_\_\_\_\_

**Do you plan to subcontract any portion of this project? Yes \_\_\_\_\_ No \_\_\_\_\_**

THE UNDERSIGNED PROPOSES TO FURNISH THE FOLLOWING ITEMS IN STRICT CONFORMANCE TO THE BID SCOPE OF WORK AND BID INVITATION ISSUED BY CHARLTON COUNTY. ANY EXCEPTIONS ARE CLEARLY MARKED ON THE ATTACHED COPY OF THE SOLICITATION RFP #FY2021-1103B.

Per ton Price \$ \_\_\_\_\_

Written Price \_\_\_\_\_

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(Firm/Company-Printed) (Address)

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(Contractor/Bidder, Title-Printed) (Email)

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(Signature/Date) (Phone/Fax)



**Charlton County Board of Commissioners**

**LOCAL BUSINESS AFFIDAVIT OF ELIGIBILITY**

\*Legal Name of Business: \_\_\_\_\_

1. \*Mailing Address:

\*Physical Address: (If Different)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Year business was established in Charlton County: \_\_\_\_\_

3. \*Occupational Tax License number issued and County/City where issued: \_\_\_\_\_

4. \*Business Type (circle one):      Corporation      Partnership      Sole Proprietorship

5. Does your business have more than one office in Charlton County? Yes No

If yes, specify the location(s): \_\_\_\_\_

6. \*Is your business' principal base of operations in Charlton County? Yes      No

7. Does your business have any locations outside of Charlton County? Yes      No

If yes, specify the location(s): \_\_\_\_\_

8. Bank (branch in Charlton County): \_\_\_\_\_

CERTIFICATION: I hereby certify under penalty of perjury that the information, which I have provided, on this form is true, and correct, that I am authorized to sign on behalf of the business set out above, and if requested by the County will provide, within 10 days of notice, the necessary documents to substantiate the information provided on this form.

\*Attest: \_\_\_\_\_

\*Authorized Signature: \_\_\_\_\_

Sworn to and subscribed before me this \_\_\_\_\_

\*Print Name: \_\_\_\_\_

Day of \_\_\_\_\_, 20\_\_\_\_\_

\*Title: \_\_\_\_\_

Commission Expires: \_\_\_\_\_

(Seal)

\*Non-Local Business \_\_\_\_\_  
(Check Here)

**Mandatory Document** – Complete all areas above and return with your Bid Submittal. If your business is NOT local, please complete only those areas marked with an asterisk (\*)



**Charlton County Board of Commissioners**  
**DRUG-FREE WORKPLACE AFFIDAVIT**

I hereby certify that I am a principle and duly authorized representative of:

\_\_\_\_\_

Whose address is:

\_\_\_\_\_

And it is also that:

1. The provisions of Section § 50.24.1 through § 50.24.6 of the Official Code of Georgia Annotated, relating to the “Drug Free Workplace Act” have been complied with in full; and,
2. A drug free workplace will be provided for the CONTRACTOR’S employees during the performance of the contract; and,
3. Each subcontractor hired by the CONTRACTOR shall be required to ensure that the subcontractor’s employees are provided a drug free workplace. The CONTRACTOR shall secure from that subcontractor the following written certification: “As part of the subcontracting Agreement with \_\_\_\_\_

\_\_\_\_\_ certifies to the CONTRACTOR that a drug free workplace will be provided for the subcontractor’s employees during the performance of this contract pursuant to paragraph (7) of subsection (b) of the Official Code of Georgia Annotated Section § 50.24.3”; and,

4. It is certified that the undersigned will not engage in unlawful manufacture, sale, distribution, dispensation, possession, or use of a controlled substance or marijuana during the performance of the contract.

\_\_\_\_\_ Date

\_\_\_\_\_ Signature

**THIS PAGE MUST BE COMPLETED AND SUBMITTED AS A PART OF YOUR BID**



**Charlton County Board of Commissioners**

**IMMIGRATION AND SECURITY FORM**

**GEORGIA SECURITY & IMMIGRATION COMPLIANCE (GSIC) ACT AFFIDAVIT**

Contractors Name	
County Solicitation Number	ITB# #FY2021-1103B

**CONTRACTOR AFFIDAVIT**

By executing this affidavit, the undersigned Contractor verifies its compliance with O.C.G.A. § 13-10-91, stating affirmatively that the Contractor identified above has registered with and is participating in a federal work authorization program\*, in accordance with the applicability provisions and deadlines established in O.C.G.A. § 13-10-91.

The undersigned further agrees that, should it employ or contract with any subcontractor(s) in connection with the physical performance of services pursuant to this contract with the County, Contractor will secure from such subcontractor(s) similar verification of compliance with O.C.G.A. § 13-10-91 on the attached Subcontractor Affidavit. Contractor further agrees to maintain records of such compliance and provide a copy of each such verification to the County at the time the subcontractor(s) is retained to perform such service.

\_\_\_\_\_  
EEV / E-Verify™ Company Identification Number

\_\_\_\_\_  
Date of Authorization

\_\_\_\_\_  
BY: Authorized Officer or Agent  
(Contractor Name)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title of Authorized Officer or Agent of Contractor

\_\_\_\_\_  
Printed Name of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME ON THIS  
THE \_\_\_\_\_ DAY OF \_\_\_\_\_ 20\_\_\_\_

[NOTARY SEAL]

\_\_\_\_\_  
Notary Public  
My Commission Expires:

\*any of the electronic verification of work authorization programs operated by the United States Department of Homeland Security or any equivalent federal work authorization program operated by the United States Department of Homeland Security to verify information of newly hired employees, pursuant to the Immigration Reform and Control Act of 1986 (IRCA), P.L. 99-603



**Charlton County Board of Commissioners**

**BIDDER'S CERTIFICATE AND STATEMENT OF NON-COLLUSION**

I \_\_\_\_\_ certify that this Bid is made without prior understanding, agreement or connection with any corporation, firm or person submitting a proposal for the same services and is in all respects fair and without collusion or fraud. I understand that collusive bidding is a violation of state and Federal Law and can result in fines, prison sentences, and civil damages awards.

I certify that this proposal has been prepared independently and the price submitted will not be disclosed to another person.

I certify that there has been no contact or communication by the Contractor or the Contractor's associates with any County staff, or elected officials since the date this RFP #FY2021-1103B Installation of Septic System at Traders Hill was issued except: 1) through the County Administrators Office 2) at the Pre-Bid Meeting (if applicable) or 3) as provided by existing work agreement(s). **The County reserves the right to reject the bid submitted by any Contractor violating this provision.**

I agree to abide by all conditions of this RFP and certify that I am authorized to sign this RFP.

COMPANY NAME: \_\_\_\_\_


\_\_\_\_\_  
Authorized Representative (Signature)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Authorized Representative/Title  
(Print)

**THIS PAGE MUST BE COMPLETED AND SUBMITTED AS A PART OF YOUR BID**

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

COUNTY: <b>Charlton</b>	SUBDIVISION: <b>Traders Hill Campground</b>	LOT NUMBER: <b>8-B</b>	BLOCK: <b>B</b>
PROPERTY LOCATION (ADDRESS/DIRECTIONS): <b>1388 TRACYS FERRY RD FOLKSTON, GA 31537</b>			
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: <b>09/16/2021</b>	
PROPERTY OWNER'S NAME: <b>Charlton County Board of Commissioners</b>	PHONE NUMBER: <b>(912) 496-2549</b>	ALTERNATE PHONE NUMBER: <b>912-390-0080</b>	
PROPERTY OWNER'S ADDRESS: <b>1388 TRACYS FERRY RD FOLKSTON, GA 31537</b>			
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: <input checked="" type="radio"/> Yes <input type="radio"/> (2) No	5. TYPE OF STRUCTURE (single/multi-family residence, commercial, restaurant, etc.): <b>Commercial &lt; 2000</b>	9. SOIL SERIES (e.g. Pacolet, Orangeburg, etc.):	
2. WATER SUPPLY: <input checked="" type="radio"/> Public <input type="radio"/> (2) Private <input type="radio"/> (3) Community	6. WATER USAGE BY: <b>Gallons Per Day</b>	10. PERCOLATION RATE / HYDRAULIC LOADING RATE: <b>2    0</b>	
3. SEWAGE SYSTEM TO BE PERMITTED: <input checked="" type="radio"/> New <input type="radio"/> (2) Repair <input type="radio"/> (3) Addition	7. NO. OF BEDROOMS / GPD: <b>1    2    0    0</b>	11. RESTRICTIVE SOIL HORIZON DEPTH (INCHES): <b>3    6</b>	
4. LOT SIZE (SQUARE FEET / ACRES): <b>1    0</b>	8. LEVEL OF PLUMBING OUTLET: <input checked="" type="radio"/> Ground Level <input type="radio"/> (2) Basement <input type="radio"/> (3) Above ground level	12. SOIL TEST PERFORMED BY: <b>County BOH,</b>	

**Section B — Primary / Pretreatment**

1. DISPOSAL METHOD: <b>Septic Tank</b>	2. GARBAGE DISPOSAL: <input type="radio"/> (1) Yes <input checked="" type="radio"/> (2) No	3. SEPTIC TANK CAPACITY (GALLONS): <b>2000</b>	4. ATU Capacity: <b>0</b>	5. DOSING TANK CAPACITY (GALLONS):	6. GREASE TRAP CAPACITY (GALLONS):
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**Section C — Secondary Treatment**

1. ABSORPTION FIELD DESIGN: <input type="radio"/> (1) Level Field <input type="radio"/> (2) Serial <input type="radio"/> (3) Drip <input type="radio"/> (4) Bed <input checked="" type="radio"/> (5) Distribution Box <input type="radio"/> (6) Mound/Area Fill <input type="radio"/> (7) Other	4. TOTAL ABSORPTION FIELD SQUARE FEET REQUIRED:	7. NUMBER OF ABSORPTION TRENCHES:
2. ABSORPTION FIELD PRODUCT: <b>Conventional 12x36 gravel &amp; pipe</b>	5. TOTAL ABSORPTION FIELD LINEAR FEET REQUIRED: <b>3    5    8</b>	8. SPECIFIED LENGTH OF ABSORPTION TRENCHES:
3. AGGREGATE DEPTH (inches):	6. DEPTH OF ABSORPTION TRENCHES (range in inches): <b>1    2    1    2</b>	9. Distance Between Absorption Trenches:

**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.

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.

APPROVING ENVIRONMENTALIST: 	TITLE: <b>Environmental Health District Director</b>	DATE: <b>09/16/2021</b>	CONSTRUCTION PERMIT NUMBER: <b>OSC02400743</b>
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1. SITE APPROVED AS SPECIFIED ABOVE:

Yes     (2) No





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

COUNTY: <b>Charlton</b>	SUBDIVISION: <b>Traders Hill Campground</b>	LOT NUMBER: <b>7-A</b>	BLOCK: <b>A</b>
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PROPERTY LOCATION (ADDRESS/DIRECTIONS):  
**1388 TRACYS FERRY RD FOLKSTON, GA 31537**

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: <b>09/16/2021</b>
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PROPERTY OWNER'S NAME: <b>Charlton County Board of Commissioners</b>	PHONE NUMBER: <b>(912) 496-2549</b>	ALTERNATE PHONE NUMBER: <b>912-390-0080</b>
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PROPERTY OWNER'S ADDRESS:  
**1388 TRACYS FERRY RD FOLKSTON, GA 31537**

AUTHORIZED AGENT'S NAME (IF OTHER THAN OWNER):	PHONE NUMBER:	RELATIONSHIP TO OWNER:
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**Section A — General Information**

1. REQUIRED SETBACK FROM RECEIVING BODIES (walls, lakes, sinkholes, streams, etc.) EVALUATED: <input checked="" type="radio"/> Yes <input type="radio"/> No	5. TYPE OF STRUCTURE (single/multi-family residence, commercial, restaurant, etc.): <b>Commercial &lt; 2000</b>	9. SOIL SERIES (e.g. Pacolet, Orangeburg, etc.):							
2. WATER SUPPLY: <input checked="" type="radio"/> Public <input type="radio"/> Private <input type="radio"/> Community	6. WATER USAGE BY: <b>Gallons Per Day</b>	10. PERCOLATION RATE / HYDRAULIC LOADING RATE: <table border="1" style="width: 100%;"><tr><td style="width: 80%;"></td><td style="width: 5%; text-align: center;">2</td><td style="width: 5%; text-align: center;">0</td></tr></table>		2	0				
	2	0							
3. SEWAGE SYSTEM TO BE PERMITTED: <input checked="" type="radio"/> New <input type="radio"/> Repair <input type="radio"/> Addition	7. NO. OF BEDROOMS / GPD: <table border="1" style="width: 100%;"><tr><td style="width: 12.5%; text-align: center;">1</td><td style="width: 12.5%; text-align: center;">0</td><td style="width: 12.5%; text-align: center;">5</td><td style="width: 12.5%; text-align: center;">0</td></tr></table>	1	0	5	0	11. RESTRICTIVE SOIL HORIZON DEPTH (INCHES): <table border="1" style="width: 100%;"><tr><td style="width: 80%;"></td><td style="width: 5%; text-align: center;">3</td><td style="width: 5%; text-align: center;">6</td></tr></table>		3	6
1	0	5	0						
	3	6							
4. LOT SIZE (SQUARE FEET / ACRES): <table border="1" style="width: 100%;"><tr><td style="width: 25%;"></td><td style="width: 25%; text-align: center;">1</td><td style="width: 25%; text-align: center;">0</td></tr></table>		1	0	8. LEVEL OF PLUMBING OUTLET: <input checked="" type="radio"/> Ground Level <input type="radio"/> Basement <input type="radio"/> Above ground level	12. SOIL TEST PERFORMED BY: <b>County BOH,</b>				
	1	0							

**Section B — Primary / Pretreatment**

1. DISPOSAL METHOD: <b>Septic Tank</b>	2. GARBAGE DISPOSAL: <input type="radio"/> Yes <input checked="" type="radio"/> No	3. SEPTIC TANK CAPACITY (GALLONS): <b>2000</b>	4. ATU Capacity: <b>0</b>	5. DOSING TANK CAPACITY (GALLONS):	6. GREASE TRAP CAPACITY (GALLONS):
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**Section C — Secondary Treatment**

1. ABSORPTION FIELD DESIGN: <input type="radio"/> Level Field <input type="radio"/> Serial <input type="radio"/> Drip <input type="radio"/> Bed <input checked="" type="radio"/> Distribution Box <input type="radio"/> Mound/Area Fill <input type="radio"/> Other	4. TOTAL ABSORPTION FIELD SQUARE FEET REQUIRED: <table border="1" style="width: 100%;"><tr><td style="width: 25%;"></td><td style="width: 25%;"></td><td style="width: 25%;"></td><td style="width: 25%;"></td></tr></table>					7. NUMBER OF ABSORPTION TRENCHES: <table border="1" style="width: 100%;"><tr><td style="width: 25%;"></td><td style="width: 25%;"></td><td style="width: 25%;"></td><td style="width: 25%;"></td></tr></table>				
2. ABSORPTION FIELD PRODUCT: <b>Conventional 12x36 gravel &amp; pipe</b>	5. TOTAL ABSORPTION FIELD LINEAR FEET REQUIRED: <table border="1" style="width: 100%;"><tr><td style="width: 33%; text-align: center;">3</td><td style="width: 33%; text-align: center;">1</td><td style="width: 33%; text-align: center;">3</td></tr></table>	3	1	3	8. SPECIFIED LENGTH OF ABSORPTION TRENCHES: <table border="1" style="width: 100%;"><tr><td style="width: 25%;"></td><td style="width: 25%;"></td><td style="width: 25%;"></td><td style="width: 25%;"></td></tr></table>					
3	1	3								
3. AGGREGATE DEPTH (inches):	6. DEPTH OF ABSORPTION TRENCHES (range in inches): <table border="1" style="width: 100%;"><tr><td style="width: 25%; text-align: center;">1</td><td style="width: 25%; text-align: center;">2</td><td style="width: 25%; text-align: center;">1</td><td style="width: 25%; text-align: center;">2</td></tr></table>	1	2	1	2	9. Distance Between Absorption Trenches: <table border="1" style="width: 100%;"><tr><td style="width: 25%;"></td><td style="width: 25%;"></td><td style="width: 25%;"></td><td style="width: 25%;"></td></tr></table>				
1	2	1	2							

**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.

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:
<input checked="" type="radio"/> Yes <input type="radio"/> No

APPROVING ENVIRONMENTALIST: 	TITLE: <b>Environmental Health District Director</b>	DATE: <b>09/16/2021</b>	CONSTRUCTION PERMIT NUMBER: <b>OSC02400742</b>
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