Arkansas Department of Health
Environmental Health Protection

Receipt Number
28788114

Individual Onsite Wastewater System Permit Application

Permit Type
- [x] New Installation
- [ ] Alteration / Repair

DR Environmental ID #

1	4	1	4	6	3	6	4			

Fee Schedule for Structures		✓
Structures 1500 sq ft or less	$ 30.00	[x]
Structures more than 1500 sq ft and up to 2000 sq ft	$ 45.00	[ ]
Structures more than 2000 sq ft and up to 3000 sq ft	$ 90.00	[ ]
Structures more than 3000 sq ft and up to 4000 sq ft	$120.00	[ ]
Structures more than 4000 sq ft	$150.00	[ ]
Alteration and Repair	$ 30.00	[ ]

Part 1 Application

Treatment Type (check one)
- [x] STD = Standard Septic Tank
- [ ] ISF = Intermittent Sand Filter
- [ ] PMF = Proprietary Media Filter
- [ ] OTH = Other (Describe)
- [ ] ATU = Aerobic Treatment Plant
- [ ] RSF = Re-circulating Sand Filter
- [ ] RGF = Re-circulating Gravel Filter
- [ ] HLD = Holding Tank

Disposal Method (check one)
- [x] STD = Standard Absorption Field
- [ ] SUR = Surface Discharge
- [ ] CPF = Capping Fill
- [ ] OTH = Other
- [ ] LPD = Low Pressure Distribution
- [ ] HLD = Holding Tank
- [ ] SRL = Serial Distribution
- [ ] DRP = Drip Irrigation

1. Owner's/Applicant's Name: Chris Holt c/o Jeff Gay
2. Phone Number: 479-253-3430
3. Mailing Address: Jeffgay1@gmail.com
4. County: Carroll
5. Address of Proposed System (If a 911 address is not available, attach detailed directions or map): 221 CR 1531 Eureka Springs AR
6. Subdivision Name: Sherwood Forest
7. Approval Date: —
8. Date Recorded: —
9. Lot Number: 4, 5, 6
10. Lot Dimensions: See legal
11. Total Area (Acres): 3.63
12. # Bedrooms # People: 3
13. Daily Flow (GPD): 370
14. Parcel Number or Brief Legal Description of Property (Attach a separate sheet of paper, if necessary): 478-00004-000 27-20-27
15. Water Supply (Specify supplier, if Public Water): well
16. GPS Coordinates: 36.366580 -93.835320

17. Loading Rates	(gpd/ft²)	18. System Specifications						
Primary Area	.75	a. Size of Septic Tank	1000	gal	f. Trench Depth	18	inches	
Secondary Area	.75	b. Size of Dose Tank	—	gal	g. Trench Spacing	10	feet	
Percolation Test	(min/in)	c. Absorption Area	494	ft²	h. Trench Media (List Below)		i. Trench Width	
Primary Area Avg		d. Number of Field Lines	3		EZ1201	18	in	
Secondary Area		e. Length of Field Lines	3545	ft	Pitt	24	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 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.

See Opt A
Owner/Applicant/Developer/Designated Representative Signature — Date

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.

Designated Representative Signature — Title: OK — Soil Certified [x] Yes [ ] No

Print Name: Taylor Layton — Date: 9/16/26 — Phone Number: 870 929 6036

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

Environmental Specialist Signature — EHS Number: 141 — Date: 9/21/26

Individual Onsite Wastewater System Permit Application

Receipt Number

22. Soil Criteria (Primary Area)			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/ft²)
	None						.75

23. Soil Criteria (Secondary Area)			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/ft²)
	None						.75

24. Seasonal Water Table (SWT) Classes Detail

Primary Area		List Redoximorphic Features and/or Clay Content Restrictions
Brief	in	None
Moderate	in	/
Long	in	

Secondary Area		List Redoximorphic Features and/or Clay Content Restrictions
Brief	in	None
Moderate	in	/
Long	in	

Comments See Attachment A. DBox shall be accessible, Effluent filter shall be installed

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 (check one or installer signs System Installation Verification below) ☐ Environmental Health Specialist ☐ Designated Representative (original submitter)

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 (check one) ☐ Environmental Health Specialist ☐ Designated Representative (original submitter)

Signature _____ EHS / License Number _____ Date _____

* Optional System Utilization Verification Form

Arkansas Department of Health
Environmental Health Protection

Receipt Number

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Permit Type ☒ New Installation ☐ Alteration / Repair

DR Environmental ID # 1 4 1 4 6 3 6 4

Fee Schedule for Structures	√
Structures 1500 sq ft or less $ 30.00	☒
Structures more than 1500 sq ft and up to 2000 sq ft $ 45.00	☐
Structures more than 2000 sq ft and up to 3000 sq ft $ 90.00	☐
Structures more than 3000 sq ft and up to 4000 sq ft $120.00	☐
Structures more than 4000 sq ft $150.00	☐
Alteration and Repair $ 30.00	☐

☐ Homeowner

☒ Builder/Developer

TO THE PROPERTY OWNER

Onsite Wastewater System Utilization Verification

Property location: Lot 4, County Road 1531 Eureka Springs, AR 72632
(Address of Proposed System, City, State, Zip)

I hereby attest there are 3 bedrooms (____ number of persons for commercial) and the square footage of the structure that will utilize the designed 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.

As Developer/Builder, I hereby attest that the above information is correct and prior to the sale of the property, I will convey, to the buyer, all information associated with this system.

Owner/Applicant Signature Jeff Gay

Date 08/30/2026

This document must be submitted with the permit application, if the Owner/Applicant Signature Section (number 19 on the EHP-19) is not signed.

EHP-19, OPT-A (R 9/24)

Attachment A

I hereby certify that this septic system design meets all current Arkansas Department of Health Rules and Regulations, however due to the many variables, that I have no control over (ie. Soil condition, moisture conditions at installation, quality of installation, etc.) I cannot guarantee that this system will function properly for any particular period of time.

Taylor Wynn

DR 14146364

Parcel: 478-00004-000
Previous Parcel: 15741
As of: 9/14/2026 11:00:38 PM

Carroll County Report

Property Owner

Name: HOLT CHRIS & CINDY

Mailing Address: 729 BUDDY L DR
FORT WORTH, TX 76108-4553

Type: (RV) Res. Vacant

Tax District: (21A) EUREKA AMBULANCE

Millage Rate: 47.80

Property Information

Physical Address: 221 CR 1531

Subdivision: SHERWOOD FOREST

Block/Lot: N/A / 4,5,6

S-T-R: 27-20-27

Size (Acres): 3.63

Legal: LOTS 4, 5 & 6

Market and Assessed Values

	Estimated Market Value	Full Assessed (20% Market Value)	Taxable Value
Land	90,000	18,000	6,864
Building	0	0	0
Totals	**90,000**	**18,000**	**6,864**

Taxes

Estimated Taxes: 328

Homestead Credit: 0 Note: Tax amounts are estimates only. Contact the county/parish tax collector for exact amounts.

Land

Land Use	Size	Units
N/A	1.000	House Lot
Total	**1.00**	

Deed Transfers

Deed Date	File Date	Book	Page	Instrument	Deed Type	Stamps	Est. Sale	Grantee	Code	Type
1/18/2026	1/21/2026	2026R	00000412	2026R-00000412	Warr. Deed	247.50	$75,000	HOLT CHRIS & CINDY	Valid	Land Only
8/8/2017	N/A	2017	2173	N/A	Warr. Deed	105.60	$32,000	STEENBLOCK CRAIG L/ROBYN R	Valid	Land Only
12/20/1995	N/A	142	588	N/A	N/A	62.70	$19,000	OAKRIDGE TO CRAFT	00	N/A

Reappraisal Value History

Tax Year	Total Value	Total Assessed
2025	90,000.00	6,292.00
2024	40,000.00	5,720.00
2023	40,000.00	5,280.00
2022	40,000.00	4,840.00
2021	22,000.00	4,400.00
2020	22,000.00	4,400.00
2019	22,000.00	4,400.00
2018	22,000.00	4,400.00
2017	22,000.00	4,400.00
2016	22,000.00	4,400.00
2015	22,000.00	4,400.00

Map

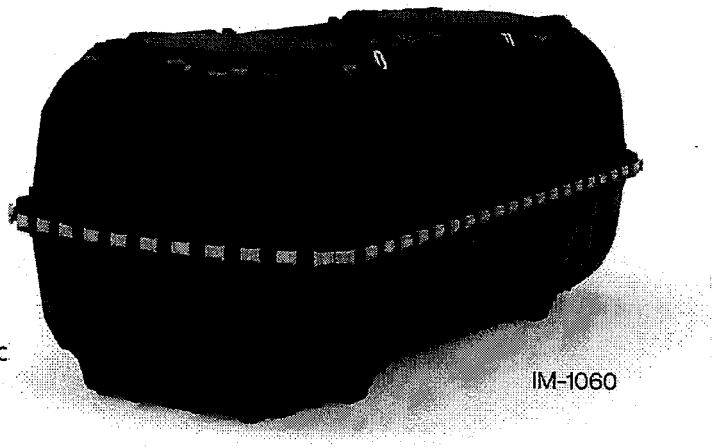
Not a Legal Document

Subject to terms and conditions
www.actDataScout.com

IM-Tanks

IM-1060

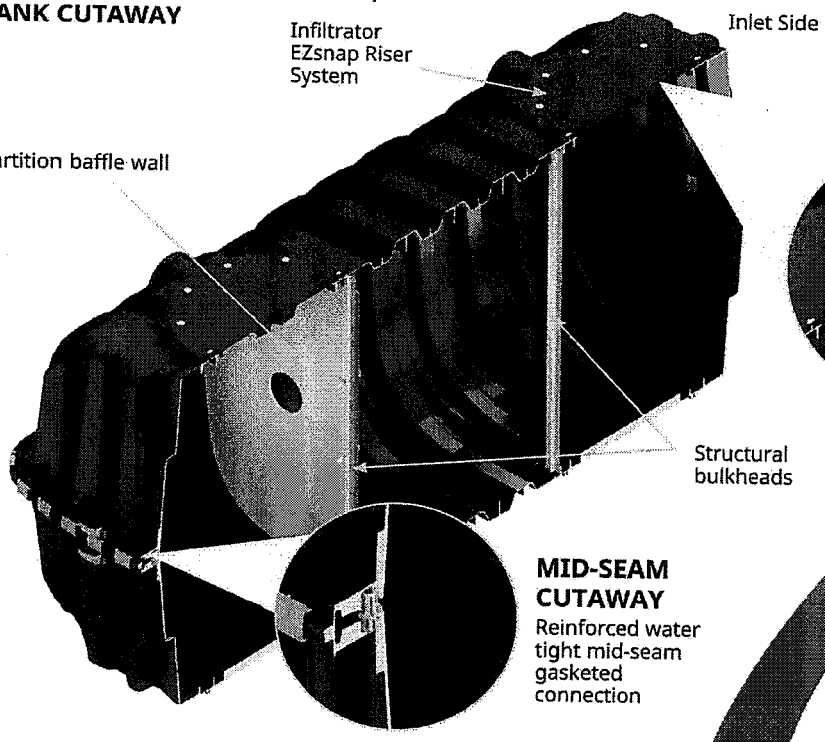
The Infiltrator IM-1060 is a lightweight strong and durable septic tank. This watertight tank design is offered with Infiltrator's line of custom-fit risers and heavy-duty lids. Infiltrator injection molded tanks provide a revolutionary improvement in plastic septic tank design, offering long-term exceptional strength and watertightness.


IM-1060

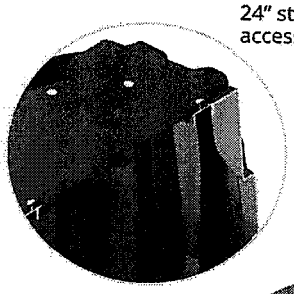
Benefits

- Strong injection molded polypropylene construction
- Lightweight plastic construction and inboard lifting lugs allow for easy delivery and handling
- Integral heavy-duty green lids that interconnect with TW™ risers and pipe riser solutions
- Structurally reinforced access ports eliminate distortion during installation and pump-outs
- Reinforced structural ribbing and fiberglass bulkheads offer additional strength
- Can be installed with 6" to 48" of cover
- Suitable for use as a septic tank, pump tank, or rainwater (non-potable) tank
- No special water filling requirements are necessary

TANK CUTAWAY



HEAVY DUTY LID CUTAWAY
Reinforced 24" structural access port



MID-SEAM CUTAWAY
Reinforced water tight mid-seam gasketed connection

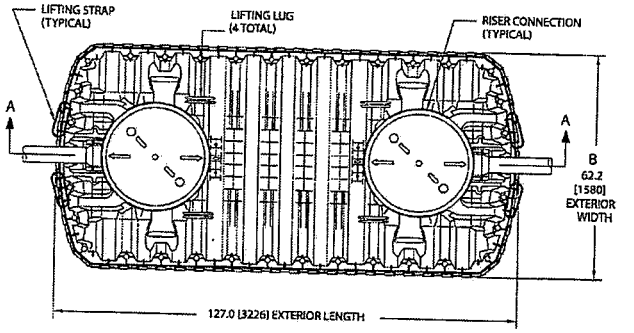
Infiltrator Water Technologies
Part of ADS

infiltratorwater.com • (800) 221-4436

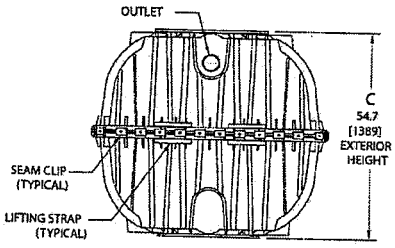
IM-1060 General Specifications and Illustrations

The IM-1060 is an injection molded two piece mid-seam plastic tank. The IM-1060 injection molded plastic design allows for a mid-seam joint that has precise dimensions for accepting an engineered EPDM gasket. Infiltrator's gasket design utilizes technology from the water industry to deliver proven means of maintaining a watertight seal.

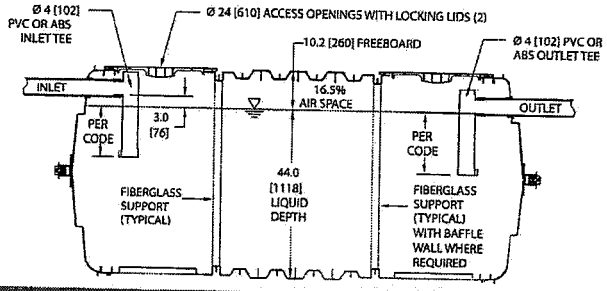
The two-piece design is permanently fastened using a series of non-corrosive plastic alignment dowels and locking seam clips. The IM-1060 is assembled and sold through a network of certified Infiltrator distributors.



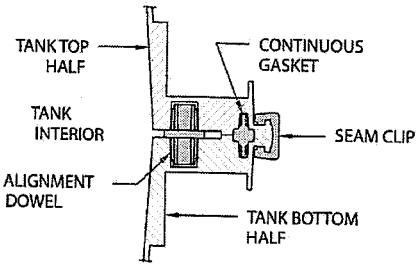
TOP VIEW



SIDE VIEW



END VIEW



MID-HEIGHT SEAM SECTION

SCAN ME

Must be backfilled and installed in accordance with the Infiltrator IM- and CM-Series Septic Tank General

Installation Instructions. For shallow ground water conditions reference the Infiltrator IM- and CM-Series Tank Buoyancy Control Guidance.

Please visit www.infiltratorwater.com or scan QR code for the latest information.

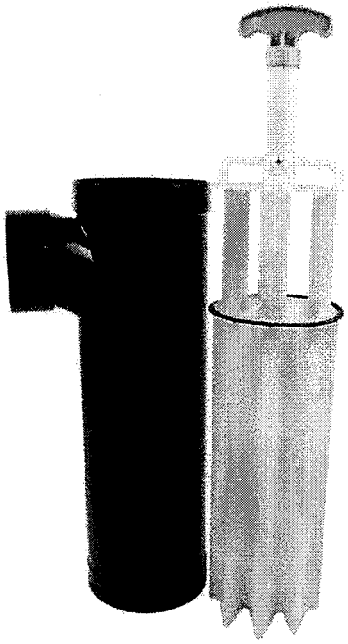
IM-1060	
Working Capacity	1094 gal (4141 L)
Total Capacity	1287 gal (4872 L)
Airspace	16.5%
Length	127" (3226 mm)
Width	62.2" (1580 mm)
Length-to-Width Ratio	2.3 to 1
Height	54.7" (1389 mm)
Liquid Level	44" (1118 mm)
Invert Drop	3" (76 mm)
Fiberglass Supports	2
Compartments	1 or 2
Maximum Burial Depth	48" (1219 mm)
Minimum Burial Depth	6" (152 mm)
Maximum Pipe Diameter	6" (152 mm)
Weight	320 lbs (145 kg)

Contact Infiltrator's Technical Services Department for assistance at 1-800-221-4436 or info@infiltratorwater.com

Infiltrator
Part of ADS

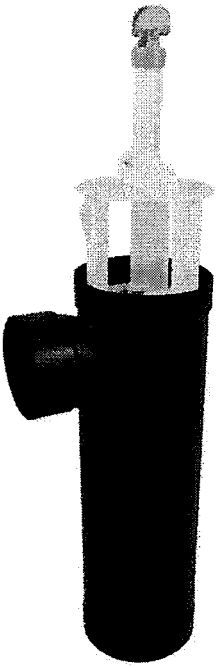
POLYLOK™ Inc.
PRECAST, DRAINAGE & WASTEWATER

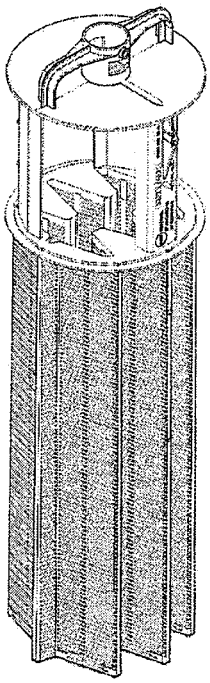
PL-250 Effluent Filter



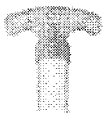
Introducing Polylok's newest addition to the effluent filter family!

PL-250
6" Filter & Housing
250' of 1/16" slots
550 SQ.IN. of total surface area





Accepts 1" PVC handle

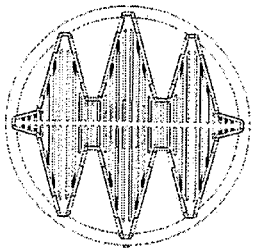


Part No. 3014-HEK

The large 6" design extends service time

550 SQ.IN.
of total surface area

BOTTOM VIEW



"W" design prevents solids from settling

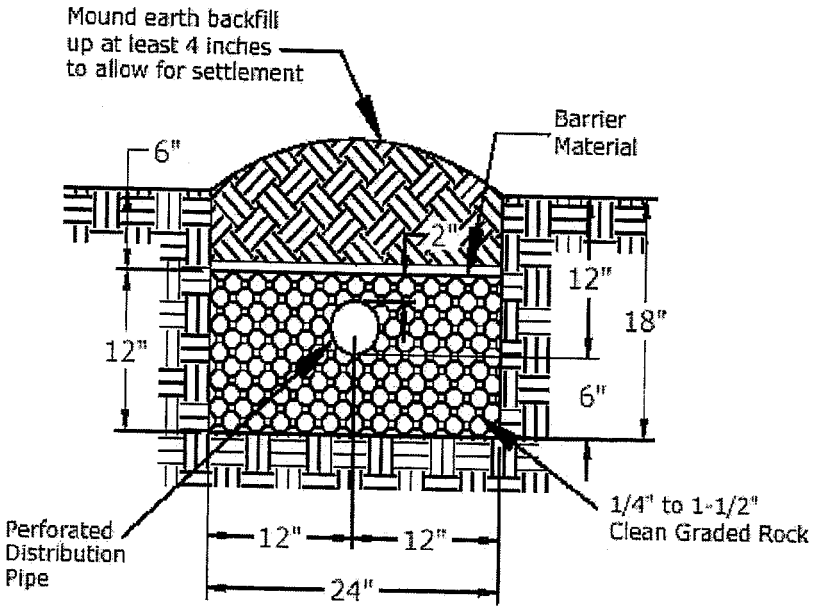
Can not be installed incorrectly

360° of filtration

Will not allow direct bypass

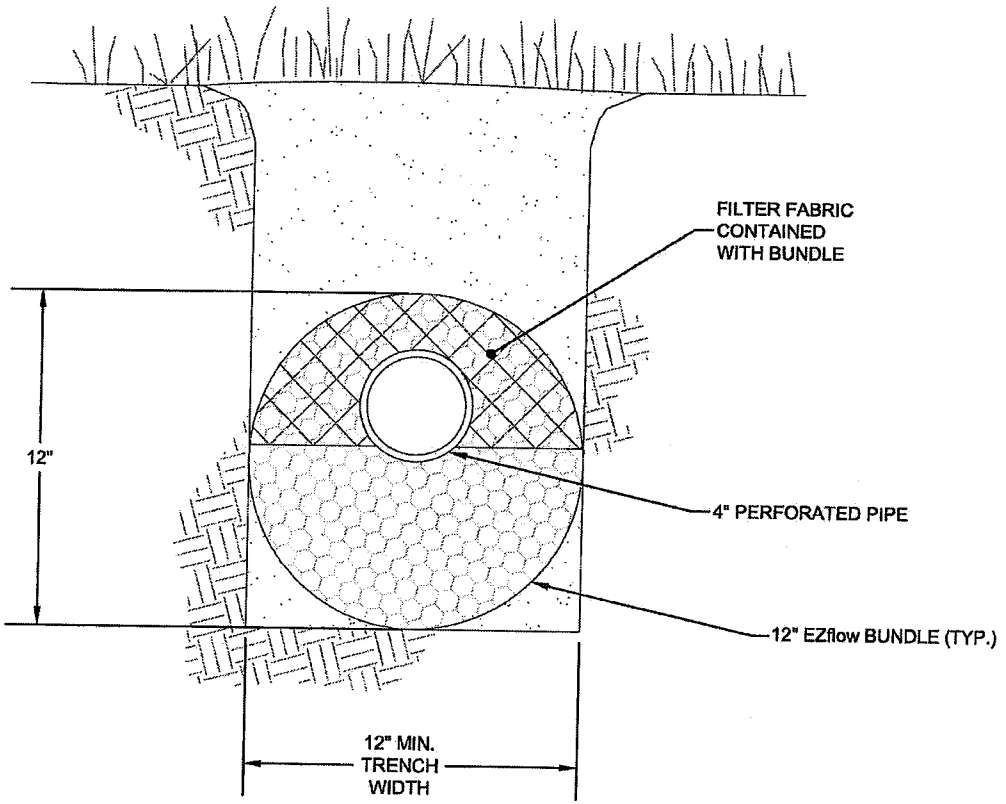
fig. 9

Lateral Line Trench Detail



18" Trench Depth

EZflow 1201P - GEO



Infiltrator Water Technologies
Part of ADS

INFILTRATOR WATER TECHNOLOGIES, LLC
4 BUSINESS PARK RD, OLD SAYBROOK, CT 06475
WWW.INFILTRATORWATER.COM
PHONE: (800) 221-4436 / EMAIL: INFO@INFILTRATORWATER.COM

EZflow

EZ*flow* 1201P - GEO
TYPICAL CROSS SECTION DETAIL

DRAWN BY	AG
DATE	04/15/2025
SCALE	N/A
SHEET NO.	01 of 01

Carroll County
Jeff Gay

Carroll County
1/13/2026
All Shots are in tenths of a foot (Shot/Ground Elev)

Benchmark 100 5.6

LOCATION	SHOT FOR GROUND LINE	ELEVATION FOR GROUND LINE	SHOT FOR FLOW LINE	ELEV FOR FLOW LINE	DIST +/- FROM GROUND LINE
STUB OUT/CLEAN OUT (D)	4	100	4.2	95.8	-0.2
SEPTIC TANK IN (D)	7.4	100	7.8	92.2	-0.4
SEPTIC TANK OUT (D)	7.3	100	8.1	91.9	-0.8
Dbox (A)	11.2	100	12.2	87.8	-1

LOCATION		Length (FEET)	SHOT FOR GROUND LINE	ELEVATION FOR GROUND LINE	SHOT FOR BOTTOM OF TRENCH	ELEV FOR BOTTOM OF TRENCH	DIST +/- FROM GROUND LINE
BEG, MID, AND END	1	85	12.5	87.5	14	86	-1.5
BEG, MID, AND END	2	85	15.8	84.2	17.3	82.7	-1.5
BEG, MID, AND END	3	85	19.7	-19.7	21.2	-21.2	-1.5

ALTERNATE AREA
LOWER LIMIT 8

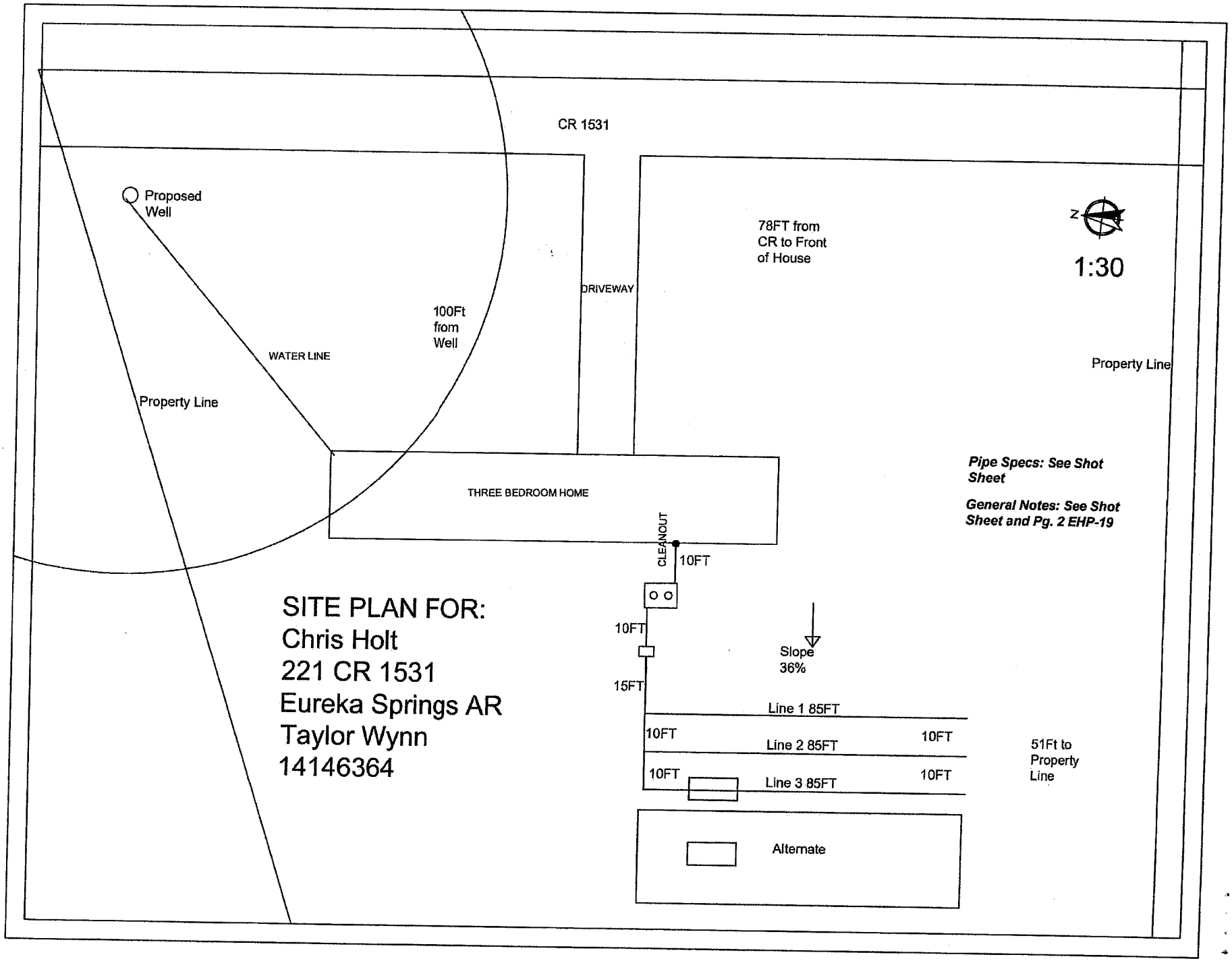
UPPER LIMIT 10

TOTAL 360 SF

BUILDING SEWER
Shall be installed in accordance with AR state plumbing code.
PIPE SPECIFICATIONS
SCH 40PVC Shall be used from the tank to the D-Box.
Sch 40 Pvc, SDR 35 PVC, or ASTM 3034 PE shall be used from the D-Box to the perforated field lines.
Field lines shall be ASTm D2729 PVC or ASTM F- 810PE if popoe and gravel is used.

General Notes:
No part of the system shall be closer thatn 10ft to any property lines.

No part of the system shall be within 100ft of a well or a stream.
No part of the system shall be closer than 50ft of a pond on the same property, or 100ft to a pond on a different property.
No part shall be closer than 10ft to any water lines.
The first 5ft of each line shall be solid pipe with the remainder being perforated line.
The first 5ft of each line shall be solid pipe with the remainder being perforated line.
Owner is responsible for verifying the accuracy of the property lines.


CR 1531
Proposed Well
78FT from CR to Front of House
N
1:30
DRIVEWAY
100Ft from Well
WATER LINE
Property Line
Property Line
THREE BEDROOM HOME
Pipe Specs: See Shot Sheet
General Notes: See Shot Sheet and Pg. 2 EHP-19
CLEANOUT
10FT
SITE PLAN FOR:
Chris Holt
221 CR 1531
Eureka Springs AR
Taylor Wynn
14146364
10FT
Slope 36%
15FT
Line 1 85FT
10FT
Line 2 85FT
10FT
10FT
Line 3 85FT
10FT
51Ft to Property Line
Alternate