File/Permit #: BCOM2505-0011

## Harnett County Environmental Health

EXISTING SYSTEM APPROVAL	
Issued by: Local Health Department	AOWE Certified Inspector
Applicant: RC CONSTRUCTION CO INC  Mailing Address: 2225 McLGAN CHARGE CN RD  City: BUNNLEVEL  State: NC Zip: 28323  Phone #: 910-221-5142  Email: markzehmorcconst.net	Owner: Mailing Address:  City: State: Zip: Phone #: Email:
PIN/Lot Identifier:	
Operation Permit/ATO #: Design Da  Number of Bedrooms: Max # Occupants:'  Wastewater Strength: Domestic	Other: Other:  Industrial Process Wastewater  Municipal Supply Spring Other:
Proposed Property Improvement: REPLACING EXISTING TRAILER	
All of the following must be checked for approval:  *For Reconnections:  Site complies with its Operation Permit or the wastewater  No current or past uncorrected malfunction of the system  DDF and wastewater strength for the proposed facility do  Facility meets the setbacks in Section .0600 of 15A NCAC 1  Existing system is being operated and maintained in accord  *For Site Modifications or Footprint Expansions:  Proposed structure meets the setbacks in Section .0600 of	as described in 15A NCAC 18E .1303(a)(2) not exceed that of the existing system 8E dance with Section .1300 of 15A NCAC 18E and permit conditions.
Approval Conditions:	
Inspector's Printed Name: OLIVER TOLKSDORS 2011 Inspector's Signature:  *See attached	Date: 6 13 35

## EXISTING SYSTEM APPROVAL SITE SKETCH

Operation Permit/ATO #:	
Owner:	Property Location/Address:
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stInclude the existing and proposed structures and applicable setbacks.