



NC DEPARTMENT OF HEALTH AND HUMAN SERVICES

ROY COOPER • Governor
KODY H. KINSLEY • Secretary
MARK BENTON • Chief Deputy Secretary for Health
SUSAN KANSAGRA • Assistant Secretary for Public Health
Division of Public Health

Submittal Includes: [x] (a2) Improvement Permit [x] (a2) Construction Authorization [] Fee \$ _____

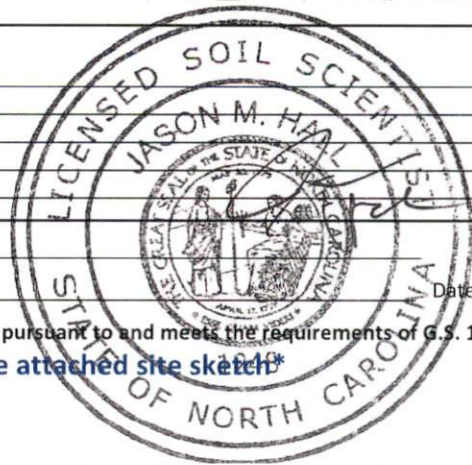
IMPROVEMENT PERMIT FOR G.S. 130A-335(a2)

County: Harnett
PIN/Lot Identifier: 2025024280
Issued To: Dream Finders Homes
Property Location: 338 Grand Griffon Way, Lillington
Subdivision (if applicable): Griffon Pointe Lot #: 21 Block: Section:
LSS Report Provided: Yes [x] No []
If yes, name and license number of LSS: Jason Hall, NC LSS #1248
New [x] Expansion [] System Relocation [] Change of Use []
Facility Type: single family
Number of bedrooms: 4 Number of Occupants: <8 Other:
Design Wastewater Strength: [x] Domestic [] High Strength [] Industrial Process Wastewater
Proposed Design Daily Flow: 480 GPD Proposed LTAR (Initial): .4 Proposed LTAR (Repair): .4
Proposed Wastewater System Type*: Illbg (Initial) Pump Required: [x] Yes [] No [] May be required
Proposed Wastewater System Type*: Illbe (Repair) Pump Required: [x] Yes [] No [] May be required
*Please include system classification for proposed wastewater system types in accordance with Rule .1301 Table XXXII
Effluent Standard: [x] DSE [] HSE [] NSF/ANSI 40 [] TS-I [] TS-II [] RCW
Saprolite System (Initial): [] Yes [x] No Saprolite System (Repair): [] Yes [x] No
Fill System (Initial): [] Yes [x] No If yes, specify: [] New [] Existing (when adding more than 6 inches of fill to system area provide a fill plan)
Fill System (Repair): [] Yes [x] No If yes, specify: [] New [] Existing (when adding more than 6 inches of fill to system area provide a fill plan)
Usable Depth to LC (Initial)*: 33ar Usable Depth to LC (Repair)*: 33ar * Limiting Condition
Max. Trench Depth (Initial)*: 19 Max. Trench Depth (Repair)*: 19 * Measured on the downhill side of the trench
Artificial Drainage Required: [] Yes [x] No If yes, please specify details:
Type of Water Supply: [] Private well [] Public well [] Shared well [x] Municipal Supply [] Spring [] Other:
Drainfield location meets requirements of Rule .0508: Yes [x] No [] Drainfield location meets requirements of Rule .0601: Yes [x] No []
Permit valid for: [x] Five years [site plan submitted pursuant to GS 130A-334(13a)] [] No expiration [plat submitted pursuant to GS 130A-334(7a)]

Permit conditions:

Licensed Soil Scientist Print Name: Jason Hall
Licensed Soil Scientist Signature: [Signature] Date: 2/3/26

The LSS evaluation is being submitted pursuant to and meets the requirements of G.S. 130A-335(a2).
See attached site sketch



This Section for Local Health Department Use Only

Initial submittal received: 2/10/26 by MO
Date Initials

G.S. 130A-335(a3) states the following:

When an applicant for an Improvement Permit submits to a local health department an Improvement Permit application, the permit fee charged by the local health department, the common form developed by the Department, and a soil evaluation pursuant to subsection (a2) of this section, the local health department shall, within five business days of receiving the application, conduct a completeness review of the submittal. A determination of completeness means that the Improvement Permit includes all of the required components. If the local health department determines that the Improvement Permit is incomplete, the local health department shall notify the applicant of the components needed to complete the Improvement Permit. The applicant may submit additional information to the local health department to cure the deficiencies in the Improvement Permit. The local health department shall make a final determination as to whether the Improvement Permit is complete within five business days after the local health department receives the additional information from the applicant. If the local health department fails to act within any period set out in this subsection, the applicant may treat the failure to act as a determination of completeness. The Department shall develop a common form for use as the Improvement Permit.

The review for completeness of this Improvement Permit was conducted in accordance with G.S. 130A-335(a3). This Improvement Permit is determined to be:

Incomplete (If box is checked, information in this section is required.)

The following items are missing:

Copies of this were sent to the LSS and the Applicant on _____
Date

State Authorized Agent: _____ Date: _____

Complete

State Authorized Agent: Mohd A. REHS Date: 2-12-26

This Improvement Permit is issued pursuant to G.S. 130A-335 (a2) and (a3) using the signed and sealed LSS/LG evaluation(s) attached here. The issuance of this permit in no way guarantees the issuance of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This permit is subject to revocation if the site plan, plat, or the intended use changes. The Improvement Permit shall not be affected by a change in ownership of the site. This permit is subject to compliance with the provisions of 15A NCAC 18E and to the conditions of this permit.

The Department, the Department's authorized agents, and the local health departments shall be discharged and released from any liabilities, duties, and responsibilities imposed by statute or in common law from any claim arising out of or attributed to evaluations, submittals, or actions from a licensed soil scientist or licensed geologist pursuant to GS 130A-335(a2).

Improvement Permit Expiration Date: 2-12-31

See attached site sketch



Permit/File #: 2602-005

CONSTRUCTION AUTHORIZATION FOR G.S. 130A-335(a2)

County: Harnett Pre-Construction Conference Required: Yes [] No [x]
PIN/Lot Identifier: 2025024280, Griffon Pointe Lot 21
Issued To: Dream Finders Homes
Property Location: 338 Grand Giffon Way, Lillington, NC
AOWE/PE Plans/Evaluations Provided: Yes [x] No [] If yes, name and license number of AOWE/PE: Jason Hall, AOWE #10004E
Facility Type: Single Family

Number of bedrooms: 4 Number of Occupants: <8 Other:
[] New [] Expansion [] Repair [] System Relocation [] Change of Use
Basement? [] Yes [x] No Basement Fixtures? [] Yes [x] No
Crawl Space? [] Yes [x] No Slab Foundation? [x] Yes [] No
Type of Wastewater System* IIIbg, PM to Accepted (Initial) IIIbe, PM to PPBPS (Repair)

*Please include system classification for proposed wastewater system types in accordance with Rule .1301 Table XXXII
Design Daily Flow: 480 GPD Wastewater Strength: [x] Domestic [] High Strength [] Industrial Process WW
Session Law 2014-120 Section 53, Engineering Design Utilizing Low-flow Fixtures and Low-flow Technologies? [] Yes [x] No
Effluent Standard: [x] DSE [] HSE [] NSF/ANSI 40 [] TS-I [] TS-II [] RCW
Type of Water Supply: [] Private well [] Public well [] Shared well [x] Municipal Supply [] Spring [] Other:

Installation Requirements/Conditions
Septic Tank Size: 1000 gallons Total Trench/Bed Length: 320 feet Trench/Bed Spacing: 9 feet on center
Trench/Bed Width: 36 inches LTAR: .4 gpd/ft^2 Usable Depth to LC (Initial)*: 33ar *Limiting condition
Additional Soil Cover: n/a inches Slope Corrected Maximum Trench/Bed Depth†: 19 inches * Measured on the downhill side of the trench
Pump Tank Size (if applicable): 1000 gallons Requires more than 1 pump? [] Yes [x] No
Pump Requirements: 14 ft. TDH vs. 30.3 GPM Grease Trap Size (if applicable): gallons
Distribution Method: [] Serial [] D-Box or Parallel [x] Pressure Manifold(s) [] LPP [] Other:
Artificial Drainage Required: Yes [] No [x] If yes, please specify details:

Legal Agreements (If the answer is "Yes" to any type of legal agreements, please attach a copy of the agreement.)
Multi-party Agreement Required [.0204(g)]: [] Yes [x] No Declaration of Restrictive Covenants: [] Yes [x] No
Easement, Right-of-Way, or Encroachment Agreement Required [.0301(b)]: [] Yes [x] No
Management Entity Required: [] Yes [x] No Minimum O&M Requirements:

Permit conditions:
Use 1000 gallon septic & pump tanks, state approved with risers
Need effluent filter and concrete manifold box as shown
do not grade or fill septic area, no swales in septic areas as well

The requirements of 15A NCAC 18E are incorporated by reference into this permit and shall be met. Systems shall be installed in accordance with the attached site sketch. This Construction Authorization is subject to revocation if the site plan, plat, or the intended use changes. The Construction Authorization shall not be affected by a change in ownership of the site. This Construction Authorization is subject to compliance with the provisions of 15A NCAC 18E, or 15A NCAC 18A .1900, as applicable, and to the conditions of this permit.

AOWE/PE Print Name: Jason Hall
AOWE/PE Signature: [Signature] Date: 2/3/26
This AOWE/PE submittal is pursuant to and meets the requirements of G.S. 130A-335(a2) and (a)

See attached site sketch



This Section for Local Health Department Use Only

Initial submittal received: 2-10-26 by MO
 Date Initials

G.S. 130A-335(a5) states the following:

When an applicant for a Construction Authorization, or an Improvement Permit and Construction Authorization together, submits a Construction Authorization, or an Improvement Permit and Construction Authorization application together, the permit fee charged by the local health department, the common form developed by the Department, and any necessary signed and sealed plans or evaluations conducted by a person licensed pursuant to Chapter 89C of the General Statutes as a licensed engineer or a person certified pursuant to Article 5 of Chapter 90A of the General Statutes as an Authorized On-Site Wastewater Evaluator, the local health department shall, within five business days of receiving the application, conduct a completeness review of the submittal. A determination of completeness means that the Construction Authorization or Improvement Permit and Construction Authorization includes all of the required components. If the local health department determines that the Construction Authorization or Improvement Permit and Construction Authorization is incomplete, the local health department shall notify the applicant of the components needed to complete the Construction Authorization or Improvement Permit and Construction Authorization. The applicant may submit additional information to the local health department to cure the deficiencies in the Construction Authorization or Improvement Permit and Construction Authorization. The local health department shall make a final determination as to whether the Construction Authorization or Improvement Permit and Construction Authorization is complete within five business days after the local health department receives the additional information from the applicant. If the local health department fails to act within any period set out in this subsection, the applicant may treat the failure to act as a determination of completeness. The applicant may apply for the building permit for the project upon the decision of completeness of the Construction Authorization or Improvement Permit and Construction Authorization by the local health department or if the local health department fails to act within five business days. The Authorized On-Site Wastewater Evaluator or licensed engineer submitting the evaluation pursuant to this subsection may request that the local health department revoke or suspend the Construction Authorization or Improvement Permit and Construction Authorization for cause. Upon written request of the Authorized On-Site Wastewater Evaluator or licensed engineer, the local health department shall suspend or revoke the Construction Authorization or Improvement Permit and Construction Authorization pursuant to G.S. 130A-23. The Department shall develop a common form for use as the Construction Authorization.

The review for completeness of this Construction Authorization was conducted in accordance with G.S. 130A-335(a5). This Construction Authorization is determined to be:

Incomplete (If box is checked, information in this section is required.)

The following items are missing: _____

Copies of this were sent to the AOWE/PE and the Applicant on _____
Date

State Authorized Agent: _____ Date: _____

Complete
 State Authorized Agent: Moh A REHS Date of Issuance: 2-12-26

This Construction Authorization is issued pursuant to G.S. 130A-335(a2) and (a5) using the signed and sealed plans or evaluations attached here. This Construction Authorization is subject to revocation if the site plan, plat, or the intended use changes. The Construction Authorization shall not be affected by a change in ownership of the site. This Construction Authorization is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit.

The Department, the Department's authorized agents, and the local health departments shall be discharged and released from any liabilities, duties, and responsibilities imposed by statute or in common law from any claim arising out of or attributed to plans, evaluations, preconstruction conference findings, submittals, or actions from a person licensed pursuant to Chapter 89C of the General Statutes as a licensed engineer or a person certified pursuant to Article 5 of Chapter 90A of the General Statutes as an Authorized On-Site Wastewater Evaluator in GS 130A-335(a2), (a5), and (a7). The Department, the Department's authorized agents, and the local health departments shall be responsible and bear liability for their actions and evaluations and other obligations under State law or rule, including the issuance of the operations permit pursuant to GS 130A-337.

Construction Authorization Expiration Date: 2-12-31

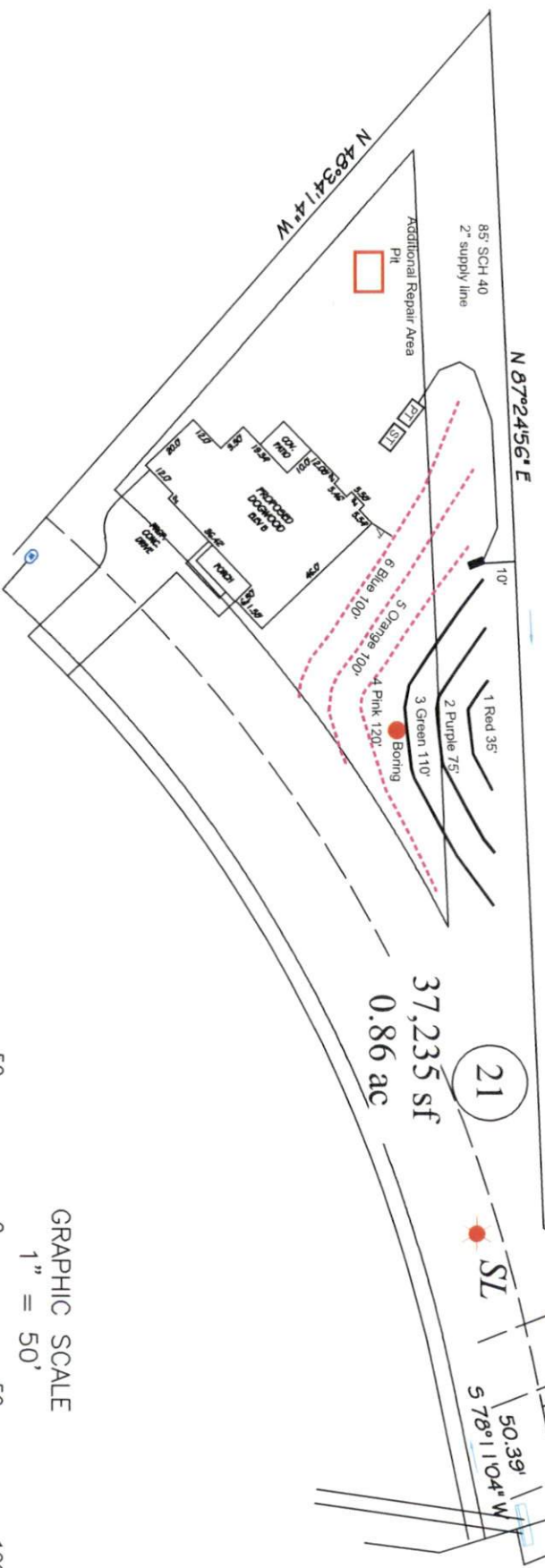
See attached site sketch

- *Keep tanks and drain lines 10' from property lines.
- *Not a survey.
- *Not a guarantee of a septic permit.
- *Keep supply lines >5' from property lines.
- *Some lines are flagged longer in the field than lengths indicate.
- *No grading septic area.
- *No adding soil within septic area
- *No rutting-up septic area
- *No cuts of >2' within 15' of septic areas



System: Pressure Manifold Lines: 4-6, (320') Accepted Status System 0.4 Soil LTAR 19" TB	Repair: Pressure Manifold Lines: 1-3, (220') PPBPS, Horizontal 0.4 Soil LTAR 19" TB
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1000 gallon septic & pump tanks with risers

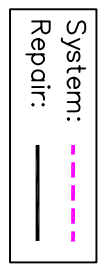


Central Carolina Soil Consulting, PLLC
1900 South Main Street, Suite 110
Wake Forest, North Carolina 27587
Phone (919)569-6704 Fax (919)569-6703

4-Bedroom Septic Layout
Lot 21, Grand Griffon Pointe
Harnett County, North Carolina

Job#: 5130
Drawn By: AH & JH
Date: 01/13/2026
Revision: 2/3/26

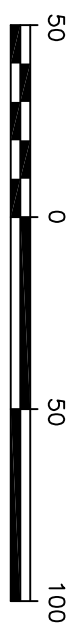
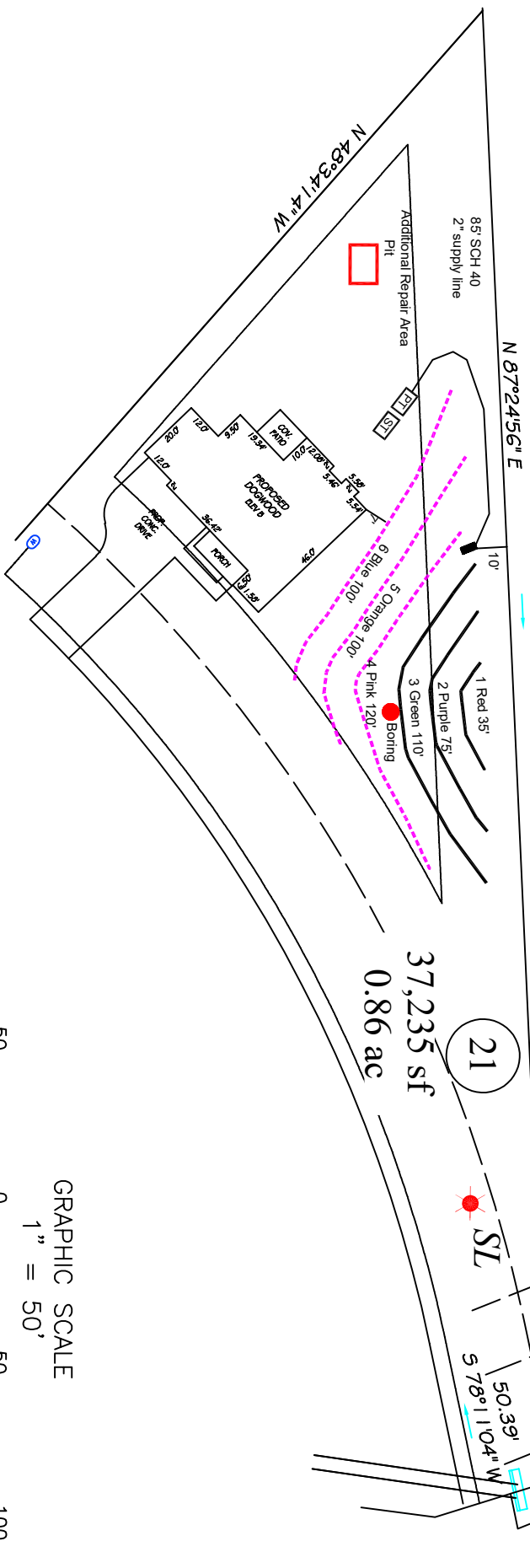
- *Keep tanks and drain lines 10' from property lines.
- *Not a survey.
- *Not a guarantee of a septic permit.
- *Keep supply lines >5' from property lines.
- *Some lines are flagged longer in the field than lengths indicate.
- *No grading septic area.
- *No adding soil within septic area
- *No rutting-up septic area
- *No cuts of >2' within 15' of septic areas



System: Pressure Manifold
 Lines: 4-6, (320')
 Accepted Status System
 0.4 Soil LTAR
 19" TB

Repair: Pressure Manifold
 Lines: 1-3, (220')
 PPBPS, Horizontal
 0.4 Soil LTAR
 19" TB

1000 gallon septic & pump tanks with risers



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 1900 South Main Street, Suite 110
 Wake Forest, North Carolina 27587
 Phone (919)569-6704 Fax (919)569-6703

4-Bedroom Septic Layout
 Lot 21, Grand Griffon Pointe
 Harnett County, North Carolina

Job#: 5130
Drawn By: AH & JH
Date: 01/13/2026
Revision: 2/3/26

Based on the findings during the field evaluation, the area on the attached map has at least 33 inches (initial) and 33 inches (repair) of provisionally suitable soils for a modified conventional septic system. The assigned LTAR for the site is 0.4 gpd/ft² with a maximum depth of 19 inches for the initial system installation of the drain lines due to slope correction. The assigned LTAR for the site is 0.4 gpd/ft² with a maximum depth of 19 inches for the repair system installation of the drain lines due to slope correction. **Please note the site has a dense layer of stone in the soil profile and additional test pits may yield deeper trench installation if requested.**

Septic Installation:

The septic system for the lot should be installed during dry soil conditions. The septic system should be installed on contour while maintaining all required setbacks. **Lot lines must be clearly marked by your surveyor prior to system installation so your installer can verify all setbacks before digging.**

Setbacks: (see septic design page for locations)

- **Septic and Pump Tanks** (see septic design)
 - 10' minimum from property lines
 - 5' minimum from house
- **Septic Lines** (see septic design)
 - 10' minimum from property lines
 - 5' minimum from house
- **Manifold's and D-Box's** (see septic design)
 - 10' minimum from property lines
- **Supply Lines** (see septic design)
 - 5' minimum from property lines
- **Utilities**
 - Water (10' minimum for all septic components)
 - Power, cable, internet, etc. (5' minimum setback)

Grading:

No grading should be completed within the initial and repair septic areas that change the natural grade of the area. There should be no cutting or filling within the septic areas as well. When grading the lot, no cuts of 2' or greater should be within 15' of the septic areas. If a cut is required near the septic area, keep the cut around 6-8 inches in depth.

HOUSE:

- Initial System: Pressure manifold, lines 4-6 totaling 320' (see layout)
- Repair System: pressure manifold, lines 1-3 totaling 220' of PPBPS (see layout)
- 480 gal/day flow rate (4-bedroom)
- 1,000 gallon septic & pump tanks with risers and pressed in rubber boots on both the inlet and outlet ends and a secondary lid in each tank opening
- 19" max trench depth for Initial System
- 19" max trench depth for Repair System
- 0.4 LTAR for Initial
- 0.4 LTAR for Repair
- No grading/filling septic areas
- No cuts >2' within 15' of septic areas
- Keep tanks and drain lines 10' from property lines
- Keep supply line >5' property lines
- Install in dry soil conditions
- Maintain natural contours when clearing the lot
- Concrete manifold box required

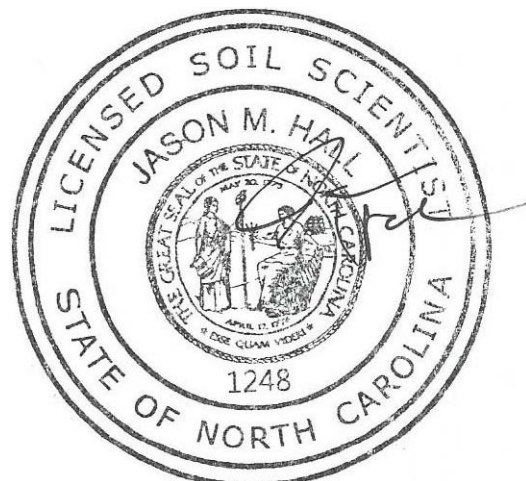
This letter discusses the location of provisionally suitable soils for subsurface wastewater disposal systems and does not guarantee the future function of any wastewater system on sites. Central Carolina Soil Consulting, PLLC is a professional consulting firm specializing in soil delineations and designs for on-site wastewater disposal systems.

If you have any questions regarding the findings on the attached map or in this report, please feel free to contact me at any time. Thank you for allowing Central Carolina Soil Consulting to perform this site evaluation for you.

Sincerely,



Jason Hall
NC Licensed Soil Scientist #1248
AOWE certification number 10004E



Encl: Soil Map & septic layout

Central Carolina Soil Consulting, PLLC

1900 South Main Street, Suite 110, Wake Forest, NC 27587

Page ____ of ____

PROPERTY ID #: _____

COUNTY: _____

SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

(Complete all fields in full)

OWNER: _____ Dream Finders Homes _____ DATE EVALUATED: _____ 12/14/25

ADDRESS: _____ 3709 Raeford road, suite 200 Fayetteville, NC 28304

PROPOSED FACILITY: _____ 4-Bedroom _____ PROPOSED DESIGN FLOW (.0400): _____ 480 _____ PROPERTY SIZE: _____

LOCATION OF SITE: _____ 338 Grand Griffon Way, Lillington, NC 27546 _____ PROPERTY RECORDED: _____

WATER SUPPLY: Public Single Family Well Shared Well Spring Other _____ WATER SUPPLY SETBACK: _____

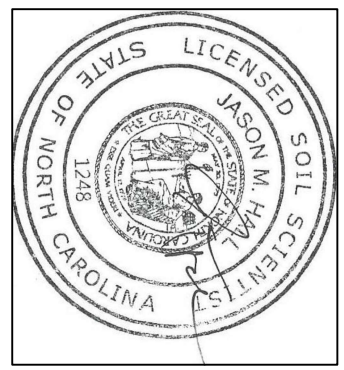
EVALUATION METHOD: Auger Boring Pit Cut _____ TYPE OF WASTEWATER: Domestic High Strength IPWW

P R O F I L E #	.0502 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY		OTHER PROFILE FACTORS				.0509 PROFILE CLASS & LTAR*	.0502(d) SLOPE CORRECTION
			.0503 TEXTURE/ STRUCTURE	.0503 CONSISTENCE/ MINERALOGY	.0504 SOIL WETNESS/ COLOR	.0505 SOIL DEPTH	.0506 SAPRO CLASS	.0507 RESTR HORIZON		
1	Augor boring	AE, 0-33ar	SL, Gr	VFR, NS NP		S-33			S.4	1.88"
	R-5									
2	Pit	AE, 0-28	SL, Gr	VFR, NS, NP						1.88"
	R-5	Bt, 38-37	SCL, SBK	FR, SS, SP, SEXP		S-37		S.4		
		Bt2, 37+	SCL, SBK	FI, SS, SP, SEXP	10 YR 6/2	UN				

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM	SITE CLASSIFICATION (.0509): _____ suitable EVALUATED BY: _____ JH OTHER(S) PRESENT: _____
Available Space (.0508)	yes	yes	
System Type(s)	accepted	PPBPS	
Site LTAR	.4	.4	
Maximum Trench Depth	19	19	

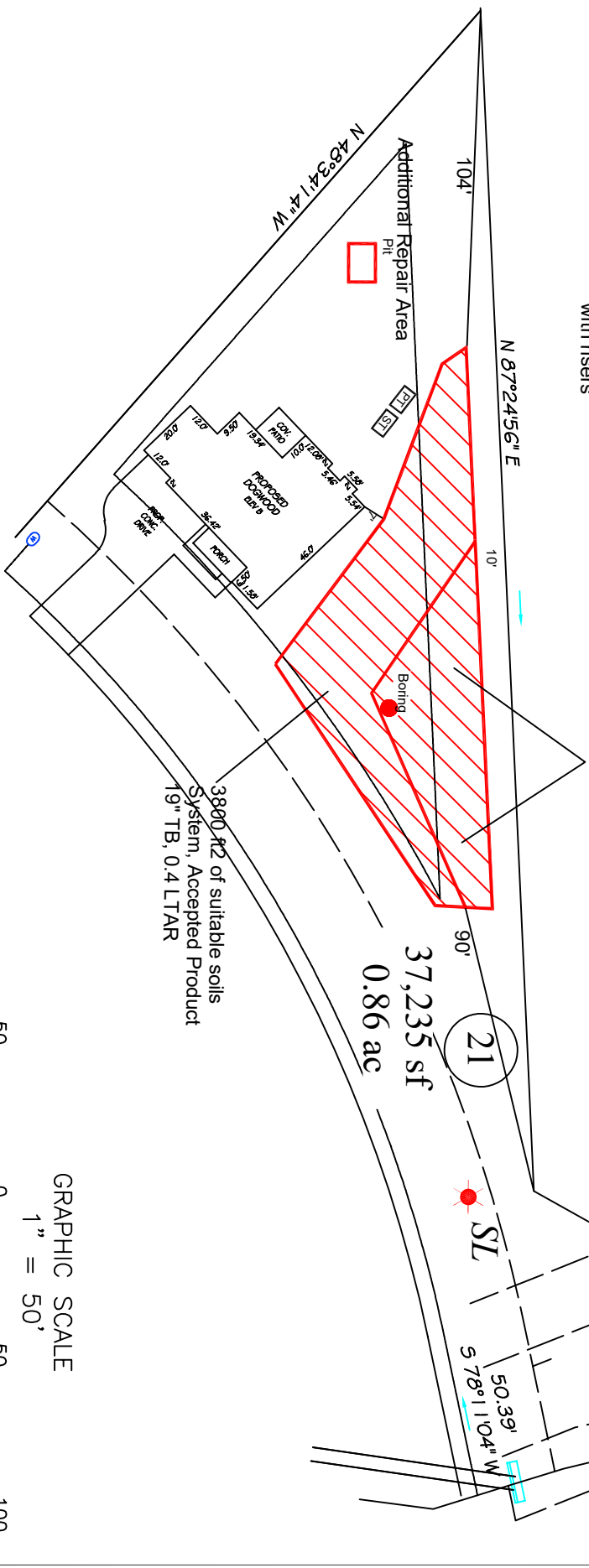
Comments: Auger refusal on several soil borings with recorded boring stopped at 33 inches by dense stone in soil profile. Additional test pits may yield suitable soils deeper than 33" and allow deeper trench depths if requested.

- *Keep tanks and drain lines 10' from property lines.
- *Not a survey.
- *Not a guarantee of a septic permit.
- *Keep supply lines >5' from property lines.
- *Some lines are flagged longer in the field than lengths indicate.
- *No grading septic area.
- *No adding soil within septic area
- *No rutting-up septic area
- *No cuts of >2' within 15' of septic areas



1000 gallon septic & pump tanks with risers

2100 ft² of suitable soils
 Repair, PPBPS, 0.4 LTAR
 19" TB, additional test pits may allow deeper install



3800 ft² of suitable soils
 System, Accepted Product
 19" TB, 0.4 LTAR



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 Wake Forest, North Carolina 27587
 Phone (919)569-6704 Fax (919)569-6703

4-Bedroom Soils Map
 Lot 21, Grand Griffon Pointe
 Harnett County, North Carolina

Job#: 5130
Drawn By: AH & JH
Date: 01/13/2026
Revision: 2/3/26



Central Carolina Soil Consulting, PLLC
1900 South Main Street, Suite 110, Wake Forest, NC 27587
Office Number: 919-569-6704

Acknowledgment of Subsurface wastewater evaluation and septic design by Central Carolina Soil Consulting, PLLC. for _____,
for issuance of an IP and CA.

For Improvement Permit (IP) issuance:

“The LSS/LG evaluation(s) attached to this application is to be used to issue an Improvement Permit in accordance with G.S. 130A-335(a2) and (a3).”

For Construction Authorization (CA) issuance:

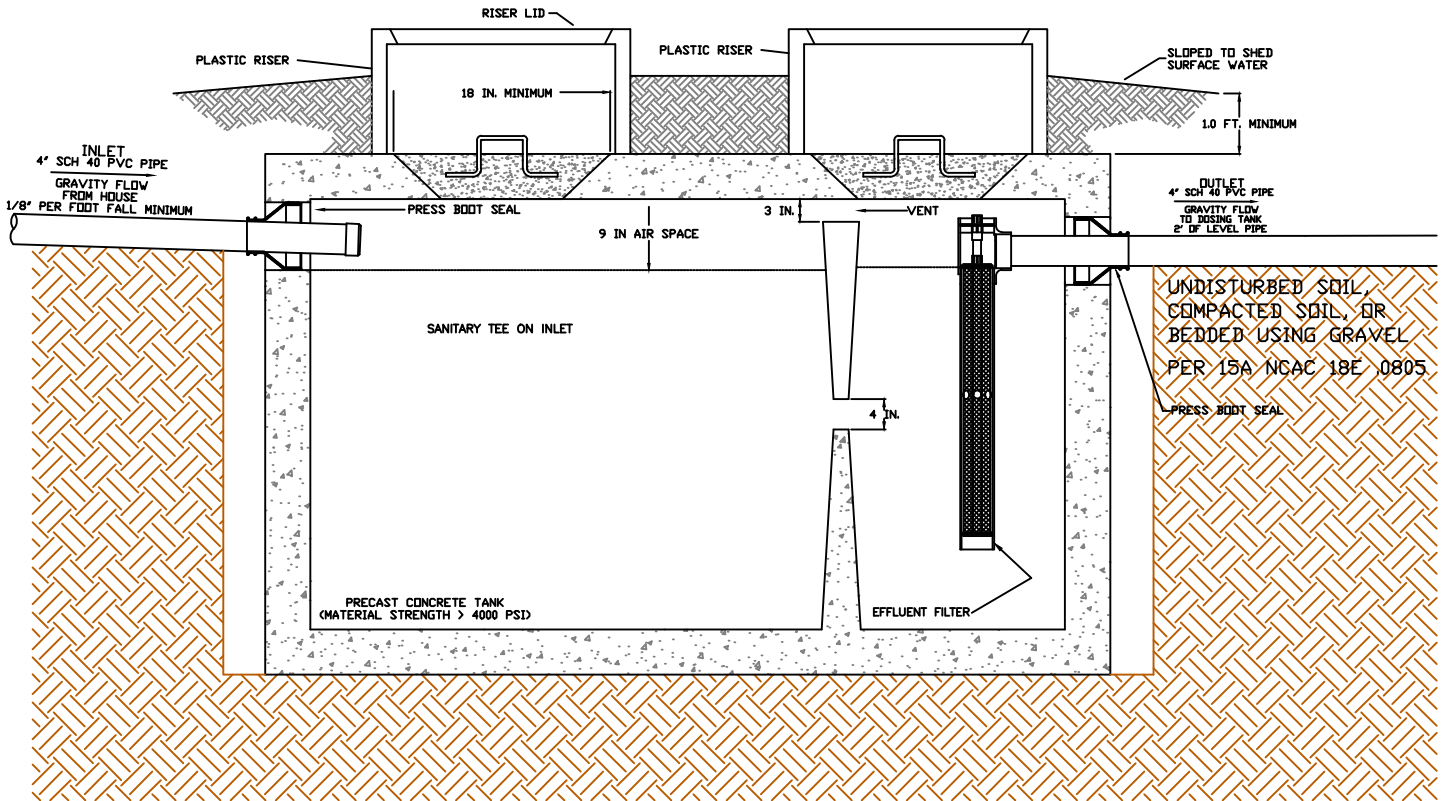
“The plans or evaluations attached to this application are to be used to issue a Construction Authorization in accordance with G.S. 130A-335(a2), (a5) and (a6).”

The LSS evaluation attached to this application was used to produce and design a subsurface wastewater septic system for permitting to obtain an IP and CA in accordance G.S. 130A-335(a2), (a3), (a5) and (a6).

Owner: _____

Owner's representative: Mackenzie Leonard

Date: _____



1000 GAL SEPTIC TANK SCHEMATIC
NOT TO SCALE

NOTES:

1. ALL TANKS SHALL BE LEAK TESTED (IN OCCURANCE TO RULE 15A NCAC 18E .0805) WHEN INSTALLED UNDER THE FOLLOWING CONDITIONS
 - (A) when a Soil Wetness Condition (SWC) is present within four feet of the elevation of the top of a mid-seam pump tank;
 - (B) with advanced pretreatment when required in the RWTS or PIA Approval;
 - (C) when required in the approved plans and specifications for a wastewater system designed by a PE;
 - (D) when the tank is constructed in place; or
 - (E) as required by the authorized agent based upon site or system specific conditions, such as misaligned seams, exposed reinforcement, or damage observed that may have occurred during transport or installation.
2. ALL TANKS MUST BE APPROVED FOR USE BY THE NORTH CAROLINA DEPARTMENT OF ENVIRONMENTAL HEALTH (DEH).
3. INVERTS SHOWN ARE APPROXIMATE. THE INSTALLER SHALL FIELD CONFIRM PRIOR TO CONSTRUCTION.
4. ALL HARDWARE INSTALLED INSIDE OF TANKS SHALL BE OF STAINLESS STEEL.
5. TANK DIMENSIONS VARY BY MANUFACTURER.
6. DRAWDOWN WILL VARY WITH TANK DIMENSIONS.
7. NO ELECTRICAL SPLICES SHALL BE MADE INSIDE THE PUMP TANK.

ALL tank openings (2 for septic tank) shall have a secondary lid or safety net installed

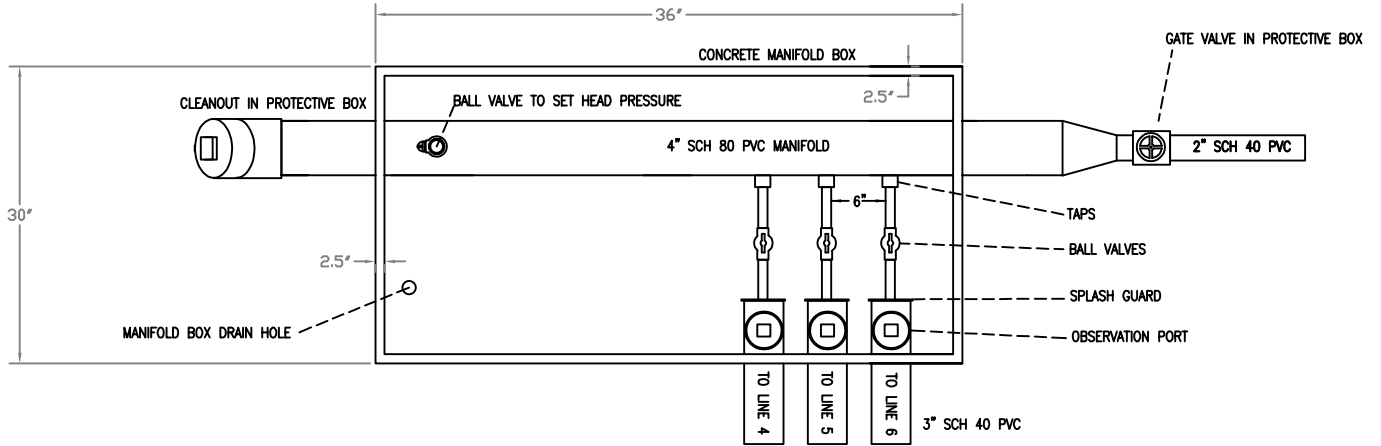


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Phone (919)569-6704 Fax (919)569-6703

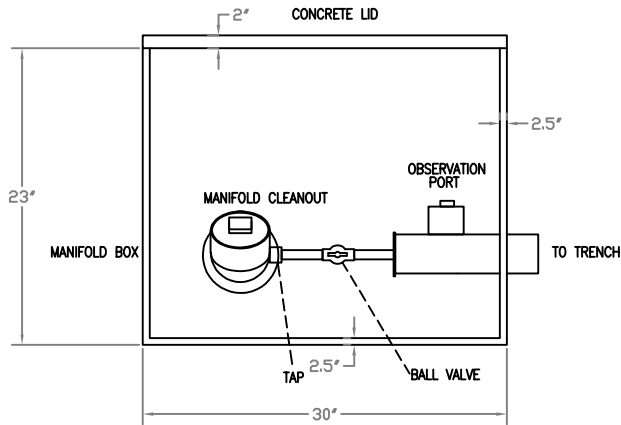
Septic Tank Details

Job#:
Drawn By: MS
Date:

PRESSURE MANIFOLD DETAILS TOP VIEW



PRESSURE MANIFOLD DETAILS END VIEW



TAP SCHEDULE	
LINE #	TAP
4	3/4" SCH 80
5	3/4" SCH 80
6	3/4" SCH 80

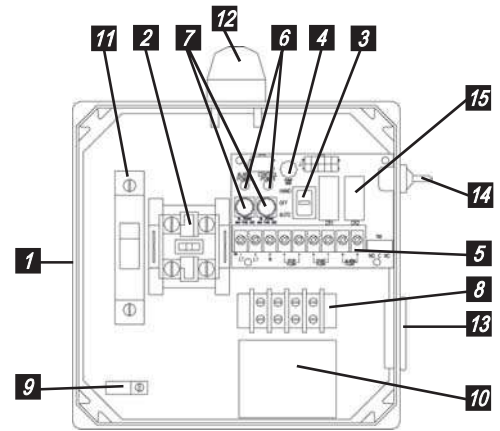
MODEL 112 Control Panel

Single phase, simplex motor contactor control.

The Model 112 control panel provides a reliable means of controlling one 120, 208, or 240 VAC single phase pump in pump chambers, sump pump basins, irrigation systems and lift stations. Two control switches activate a magnetic motor contactor to turn the pump on and off. If an alarm condition occurs, an additional alarm switch activates the audio/visual alarm system.

PANEL COMPONENTS

1. **Enclosure** measures 8 x 8 x 4 inches (20.32 X 20.32 X 10.16 cm). Choice of NEMA 1 (steel for indoor use), or NEMA 4X (ultraviolet stabilized thermoplastic with removable flanges for outdoor or indoor use).
* Options selected may increase enclosure size and change component layout.
2. **Magnetic Motor Contactor** controls pump by switching electrical lines.
3. **HOA Switch** for manual pump control (mounted on circuit board).
4. **Green Pump Run Indicator Light** (mounted on circuit board).
5. **Float Switch Terminal Block** (mounted on circuit board).
6. **Alarm and Control Fuses** (mounted on circuit board).
7. **Alarm and Control Power Indicators** (mounted on circuit board).
8. **Pump Input Power and Pump Connection Terminal Block**
9. **Ground Lug**
10. **Terminal Block Installation Label**
11. **Circuit Breaker** (optional) provides pump disconnect and branch circuit protection.



Model Shown 1121W914X

STANDARD ALARM PACKAGE

12. **Red Alarm Beacon** provides 360° visual check of alarm condition.
Note: NEMA 1 style utilizes a door mounted indicator in lieu of a beacon.
13. **Alarm Horn** provides audio warning of alarm condition (83 to 85 decibel rating).
Note: NEMA 1 style utilizes an internally mounted buzzer in lieu of horn.
14. **Exterior Alarm Test/Normal/Silence Switch** allows horn and light to be tested and horn to be silenced in an alarm condition. Alarm automatically resets once alarm condition has been cleared.
15. **Horn Silence Relay** (mounted on circuit board).

NOTE: other options available.

FEATURES

- Entire control system (panel and switches) is UL Listed to meet and/or exceed industry safety standards
- Dual safety certification for the United States and Canada
- Standard package includes three 20' Sensor Float® control switches
- Complete with step-by-step installation instructions
- Three-year limited warranty



SJE
Rhombus
CONTROLS

PO Box 1708, Detroit Lakes, MN 56502

1-888-DIAL-SJE • 1-218-847-1317

1-218-847-4617 Fax

email: sje@sjerhombus.com

www.sjerhombus.com

SEE BACKSIDE FOR COMPLETE LISTING OF AVAILABLE OPTIONS.

112 **1** **W** **1** **2** **4** **H** **3A, 8A, 8C, 15A**

MODEL 112

ALARMPACKAGE

- 0 = select options or no alarm package
- 1 = alarm package (includes test/normal/silence switch, fuse, red light, horn & float)

ENCLOSURE RATING

- I = Indoor, NEMA 1 (metal)
- W = Weatherproof, NEMA 4X (engineered thermoplastic)

STARTING DEVICE

- 1 = magnetic motor contactor 120/208/240V
- 9 = magnetic motor contactor 120V only

PUMP FULL LOAD AMPS

- 0 = 0-7 FLA
- 1 = 7-15 FLA
- 2 = 15-20 FLA
- 3 = 20-30 FLA

PUMP DISCONNECTS

- 0 = no pump disconnect
- 1 = pull-out with safety deadfront in a 10"x8" enclosure
- 4 = circuit breaker 120V (select STARTING DEVICE option 9 above)
120/208/240V (select STARTING DEVICE option 1 above)

FLOAT SWITCH APPLICATION

- H or L = pump down or pump up
- X = no floats
- WITH alarm package
- WITHOUT alarm package

OPTIONS *Listed below*



ENCLOSURE UPSIZE - If you selected 3 or more of the ★ options, or one ★★ option, a one-time enclosure upsize fee would apply.

If additional features are required, call the factory for a quote on either a SJE-Rhombus Pro-Line or Engineered Custom control panel.

CODE	DESCRIPTION	CODE	DESCRIPTION
<input type="checkbox"/>	1A Red beacon only / no audio <i>(must select 1E if floats included)</i>	<input type="checkbox"/>	11C NEMA 1 alarm panel <i>must select option 6A</i>
<input type="checkbox"/>	1C Horn only / no visual <i>(must select 1E if floats included)</i>	<input type="checkbox"/>	11D NEMA 4X alarm panel <i>must select option 6A</i>
<input type="checkbox"/>	1E Alarm float	<input checked="" type="checkbox"/>	★14B Main disconnect (rotary style, mounted through door) non-fused
<input checked="" type="checkbox"/>	3A Alarm flasher	★★ <input type="checkbox"/>	0-20 FLA (total of both pumps)
<input type="checkbox"/>	★ 3B Manual alarm reset	★★ <input type="checkbox"/>	20-30 FLA (total of both pumps)
<input type="checkbox"/>	★ 4A Low level cutout <i>(select option 4D if floats included)</i>	<input checked="" type="checkbox"/>	15A Control / alarm circuit breaker <i>Does not include the circuit board as in standard.</i>
<input type="checkbox"/>	★ 4B Red low-level indicator & alarm <i>(must select 4A also)</i>	<input type="checkbox"/>	16A 10' cord in lieu of 20' <i>(per float)</i>
<input type="checkbox"/>	4D Low-level float	<input type="checkbox"/>	16B 15' cord in lieu of 20' <i>(per float)</i>
<input type="checkbox"/>	★ 5A Thermal cutout/heat sensor auto reset (for pumps w/thermal switch leads)	<input type="checkbox"/>	16C 30' cord in lieu of 20' <i>(per float)</i>
<input type="checkbox"/>	★★5E Seal failure circuit & red indicator (2 wire)	<input type="checkbox"/>	16D 40' cord in lieu of 20' <i>(per float)</i>
<input type="checkbox"/>	6A Auxiliary alarm contact, form C type	<input type="checkbox"/>	17A SJE SignalMaster® / mounting strap ● <i>(per float)</i>
<input checked="" type="checkbox"/>	★ 8A Elapsed time meter	<input type="checkbox"/>	17B SJE SignalMaster® / externally weighted ● <i>(per float)</i>
<input checked="" type="checkbox"/>	★ 8C Event (cycle) counter	<input type="checkbox"/>	17C Sensor Float® / internally weighted ▲ <i>(per float)</i>
<input type="checkbox"/>	★★9_A Pump overload specify amperage after number 9 followed by letter "A". Example: 912A = 12 amp pump.	<input type="checkbox"/>	17D Sensor Float® / externally weighted ▲ <i>(per float)</i>
★★ <input type="checkbox"/>	0-25 FLA	<input type="checkbox"/>	17E Sensor Float® Mini / pipe clamp ▲ <i>(per float)</i>
★★ <input type="checkbox"/>	25-30 FLA	<input type="checkbox"/>	17F Sensor Float® Mini / externally weighted ▲ <i>(per float)</i>
<input type="checkbox"/>	10E Lockable latch - NEMA 4X	<input type="checkbox"/>	19T TOA (Test/Off/Automatic) switch and pump run light through door mounted
<input type="checkbox"/>	10E Lockable latch - NEMA 1	<input type="checkbox"/>	19U HOA (Hand/Off/Automatic) switch and pump run light through door mounted
<input type="checkbox"/>	★10F Lightning arrester	<input type="checkbox"/>	19X Door mounted pump run indicator
<input type="checkbox"/>	★10K Anti-condensation heater	<input type="checkbox"/>	21A SJE PumpMaster® in lieu of on/off switches ●
		<input type="checkbox"/>	21B SJE PumpMaster® Plus in lieu of on/off switches ●
		<input type="checkbox"/>	21C Super Single® in lieu of on/off switches ▲
		<input type="checkbox"/>	21D Double Float® in lieu of on/off switches ▲

● Mechanically-activated ▲ Mercury-activated

SAMPLE

MODEL **112** **1** **W** **9** **1** **4** **H** **3A 8A**

- Alarm Package
- Enclosure Rating
- Starting Device
- Pump Full Load Amps
- Pump Disconnect
- Float Switch Application
- Options: Flasher, Elapsed Time Meter



Central Carolina Soil Consulting, PLLC
1900 South Main Street, Suite 110, Wake Forest, NC 27587
Office Number: 919-569-6704

Acknowledgment of Subsurface wastewater evaluation and septic design by Central Carolina Soil Consulting, PLLC. for _____,
for issuance of an IP and CA.

For Improvement Permit (IP) issuance:

“The LSS/LG evaluation(s) attached to this application is to be used to issue an Improvement Permit in accordance with G.S. 130A-335(a2) and (a3).”

For Construction Authorization (CA) issuance:

“The plans or evaluations attached to this application are to be used to issue a Construction Authorization in accordance with G.S. 130A-335(a2), (a5) and (a6).”

The LSS evaluation attached to this application was used to produce and design a subsurface wastewater septic system for permitting to obtain an IP and CA in accordance G.S. 130A-335(a2), (a3), (a5) and (a6).

Owner: _____

Owner's representative: Mackenzie Leonard

Date: _____