

Harnett County Environmental Health

EXISTING SYSTEM APPROVAL

Issued by: Local Health Department AOWE Certified Inspector

Existing System Approval

Site modification (e.g., storage shed) or footprint addition with no DDF or wastewater strength increase

Reconnection when the proposed facility is in the same footprint as existing/previous facility

Construction Authorization/Notice of Intent to Construct

[issued for reconnection when the proposed facility is not in the same footprint as existing/previous facility pursuant to Session Law 2023-77, Section 5.(c)]
[certified inspectors are not authorized to approve reconnections outside of footprint pursuant to Session Law 2023-77, Section 5.(c)]

Applicant: Gladys Walters

Mailing Address: 257 Palamino Ln

City: Spring Lake

State: NC Zip: 28390

Phone #: 754-234-5208

Email: _____

Owner: DDD&T LLC

Mailing Address: _____

City: _____

State: _____ Zip: _____

Phone #: _____

Email: _____

PIN/Lot Identifier: _____

Property Location/Address: 140 Legacy Ln, Lillington Nc 27546

Facility Type: House/Modular Mobile/Manufactured Home Business Other: _____

Operation Permit/ATO #: _____ Design Daily Flow: 360 GPD

Number of Bedrooms: 3 Max # Occupants: 6 Other: _____

Wastewater Strength: Domestic High Strength Industrial Process Wastewater

Water Supply: Private well Public well Shared well Municipal Supply Spring Other: _____

Proposed Property Improvement: _____

All of the following must be checked for approval:

***For Reconnections:**

- Site complies with its Operation Permit or the wastewater system was in use prior to July 1, 1977
- No current or past uncorrected malfunction of the system as described in 15A NCAC 18E .1303(a)(2)
- DDF and wastewater strength for the proposed facility do not exceed that of the existing system
- Facility meets the setbacks in Section .0600 of 15A NCAC 18E
- Existing system is being operated and maintained in accordance with Section .1300 of 15A NCAC 18E and permit conditions.

***For Site Modifications or Footprint Expansions:**

- Proposed structure meets the setbacks in Section .0600 of 15A NCAC 18E

Approval Conditions: _____

Inspector's Printed Name: Mark Osborne REHS Inspector Certification #: 2613

Inspector's Signature:  Date: 02-26-24

See attached site sketch

Application # Bres 2207-0054

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
910-893-7525 Fax 910-893-2793
www.harnett.org/permits

Application for Existing Septic Tank in a Mobile Home Park

Applicant Name: Gladys Walters Date: 2-7-2024
Address: 257 Palamino Lane Spring Lake NC 28390
Telephone: (754) 234-5208

Property Owner: DDD-T, LLC Phone: 919-639-4032

Lot Address: 140 ~~xxx~~ Legacy Lane Lillington NC 27546

Name of Park: Tranquil Sands Lot Number: 9

Parcel: _____ PIN: _____

SW DW TW (Size 14 x 66) # Bedrooms 3 Year 2024

Power Company: _____ (For Progress Energy we need the premise number.)

Specific Directions to Job from Lillington:

Take 210 to Deroage Rd. Turn right, Proceed
to Nursery Rd. Turn left, Proceed to Legacy
lane, Turn right. # 9 on left.

There is a \$100.00 charge for this service. This certification is subject to revocation if the intended use of the septic system changes, or if false information is provided on this application.

You signature below certifies that all above information is correct.

Signature of owner or authorized agent: Gladys Walters

DO NOT SIGN BELOW - FOR OFFICE USE ONLY

Authorization of Existing System

Moh A. El-H
Signature of Environmental Health Specialist

2-26-24
Date