

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: SAMUEL GALVEZ

Mailing Address: 14 Hemlock CT

City: Angier

State: NC Zip: 27501

Phone #: 919 720 6371

Email: _____

Owner: Carlos Castello Escalante

Mailing Address: 2142 Baileys Crossroads Rd

City: Coats

State: NC Zip: 27521

Phone #: 919 489 6606

Email: _____

PIN/Lot Identifier: _____

Property Location/Address: 2142 Baileys Crossroads Rd

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

Operation Permit/ATO #: _____ Design Daily Flow: 240 GPD

Number of Bedrooms: 2 Max # Occupants: 4 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 Reconections:**

- 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: OFFSITE Esmt ON Prior to 81-77 Ex SFD
Repair Exempt, but has already had repair to Esmt? (could have been at)
2 Bedroom manure already on existing system NO Expansion of

Inspector's Printed Name: JAMES E MASHART JR Inspector Certification #: _____

Inspector's Signature: James E Mashart Jr Date: 8-1-24

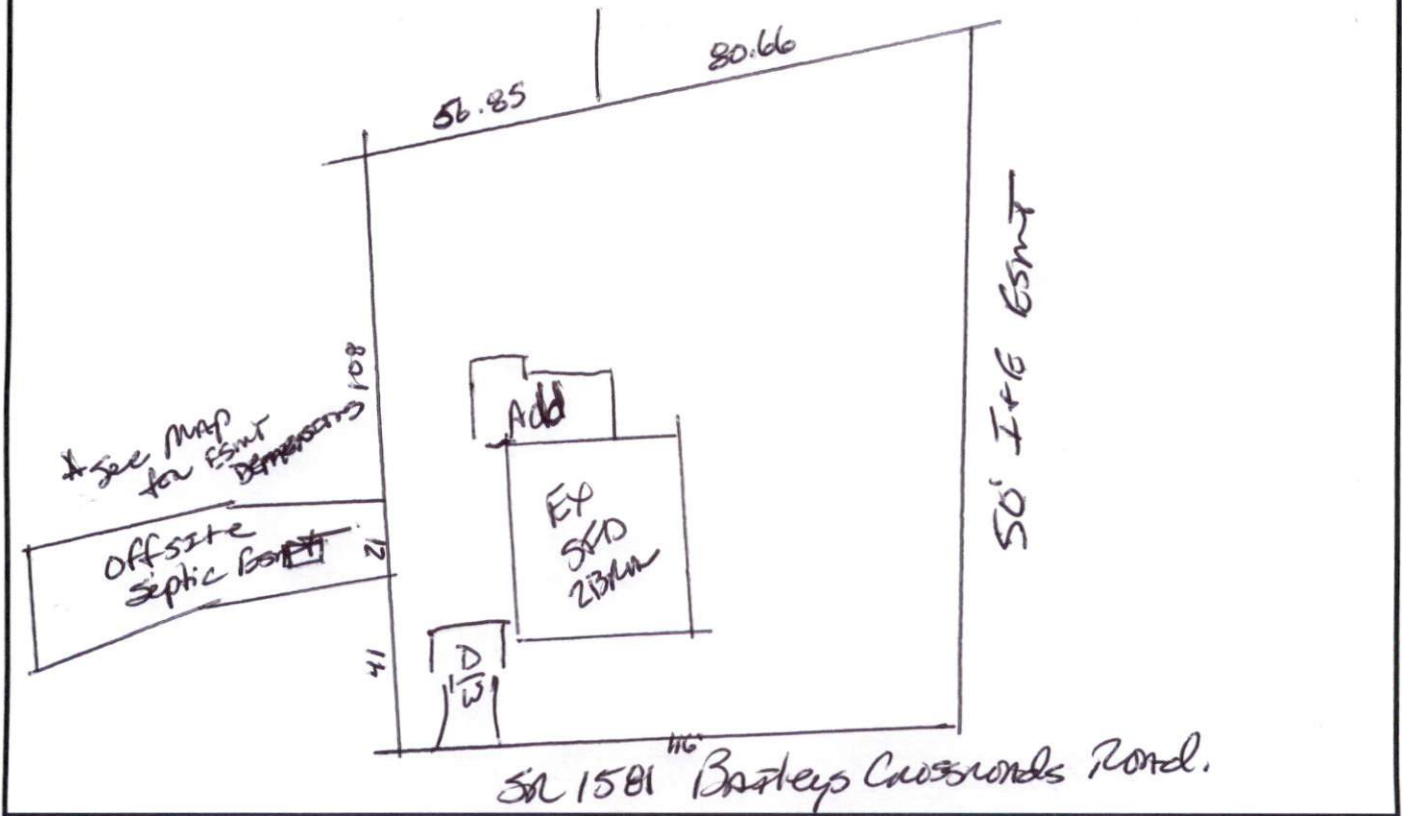
See attached site sketch

EXISTING SYSTEM APPROVAL
SITE SKETCH

Operation Permit/ATO #: BLES 2407 0045 PIN/Lot Identifier: _____
Owner: Carlos Castillo Escalante Property Location/Address: 2142 Bartley Crossroads Rd

EXISTING EXISTING SFD

*Existing System should be designed to handle a maximum of 240 gpd.
2 BRN MAX. 4 people MAX.



*Include the existing and proposed structures and applicable setbacks.