ile	Permit #	: BRES2505-0045
110/	remme #	

Harnett County Environmental Health

EXISTING SYSTEM APPROVAL

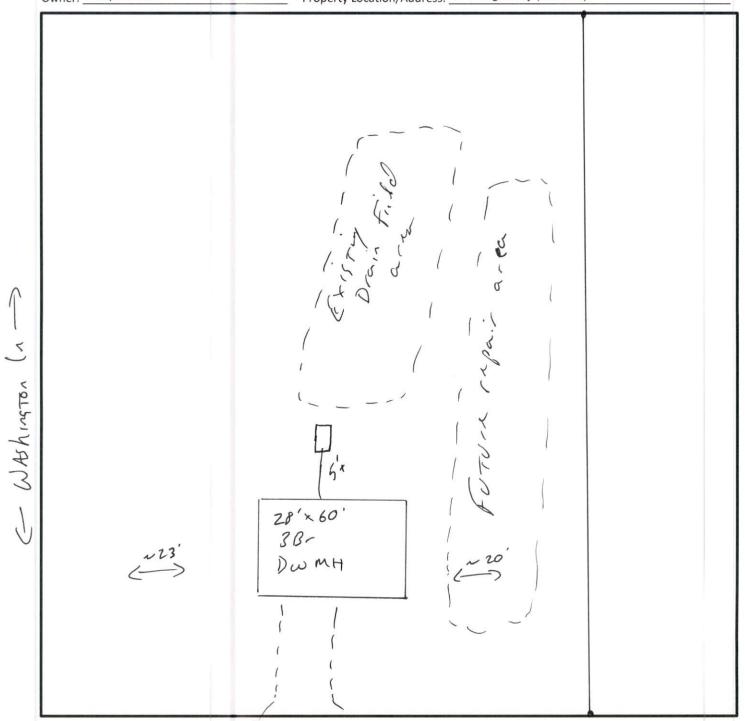
■ Reconnection when the proposed facili □ Construction Authorization/Notice of Intent to [issued for reconnection when the proposed facility is not if	r footprint addition with no DDF or wastewater strength increase ity is in the same footprint as existing/previous facility Construct In the same footprint as existing/previous facility pursuant to Session Law 2023-77, Section 5.(c)] approve reconnections outside of footprint pursuant to Session Law 2023-77, Section 5.(c)]
Applicant: Phillip Stewart	Owner: Same
Mailing Address: 618 Autumn Vally Dr	Mailing Address:
City: Sanford	
State: NC Zip: 27330	City: Zip:
Phone #: 910-580-7430	Phone #:
Email:	Email:
PIN/Lot Identifier: 9575-82-5551 Property Location/Address: 19 Georgia Way (SR 2117) Facility Type: House/Modular Mobile/Manu	
Wastewater Strength: Domestic High	Strength
DDF and wastewater strength for the propos	of the system as described in 15A NCAC 18E .1303(a)(2) ed facility or site modification do not exceed that of the existing system he setbacks in Section .0600 of 15A NCAC 18E
Approval Conditions:	
Mark Oakarna BEUG	2042
Inspector's Printed Name: Mark Osborne REHS	Inspector Certification #: 2613
Inspector's Signature:	Date: 6-5-25
The existing system annu	royal expires one year after the date of issuance.

See attached site sketch

EXISTING SYSTEM APPROVAL SITE SKETCH

Operation Permit/ATO #: BRES2505-0045 PIN/Lot Identifier: 9575-82-5551

Owner: Phillip Stewart Property Location/Address: 19 Georgia Way (SR 2117)



Georgia Way Include the existing and proposed structures and applicable setbacks.