

Harnett County Environmental Health

EXISTING SYSTEM APPROVAL

- 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: <u>TEMPLE JOSHUA AARRON & TEMPLE DEANNE NICOLE</u> Mailing Address: <u>2635 BAILEYS CROSSROADS RD</u> <hr/> City: <u>BENSON</u> State: <u>NC</u> Zip: <u>27504</u> Phone #: <u>919-397-2652</u> Email: <u>Jatmple2014@gmail.com</u>	Owner: <u>Same as Applicant</u> Mailing Address: _____ <hr/> City: _____ State: _____ Zip: _____ Phone #: _____ Email: _____
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PIN/Lot Identifier: 1610-92-1342.000 Part of Lot 4&5
 Property Location/Address: 2635 BAILEYS XRDS RD BENSON, NC 27504

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

Operation Permit/ATO #: <u>BRES2506-0059</u> Design Daily Flow: <u>360</u> GPD Number of Bedrooms: <u>3</u> Max # Occupants: <u>6</u> Other: _____ Wastewater Strength: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> High Strength <input type="checkbox"/> Industrial Process Wastewater Water Supply: <input checked="" type="checkbox"/> Private well <input type="checkbox"/> Public well <input type="checkbox"/> Shared well <input checked="" type="checkbox"/> Municipal Supply <input type="checkbox"/> Spring <input type="checkbox"/> Other: _____

Proposed Property Improvement: 20' x 38.6' Kitchen Extension, Add Bath, and Rec Room. (770 sq. FT)

- All the following must be checked for approval:
- 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 or site modification do not exceed that of the existing system
 - Proposed facility or site modification meets the setbacks in Section .0600 of 15A NCAC 18E

Approval Conditions: <u>No Driving Over Septic Lines During Construction of Install.</u> <u>No Foundation or Gutter Drains to be Directed Towards Existing Septic System.</u>
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Inspector's Printed Name: Ren Levocz Inspector Certification #: 3345
 Inspector's Signature: Date: 8-11-25

The existing system approval expires one year after the date of issuance.
****See attached site sketch****

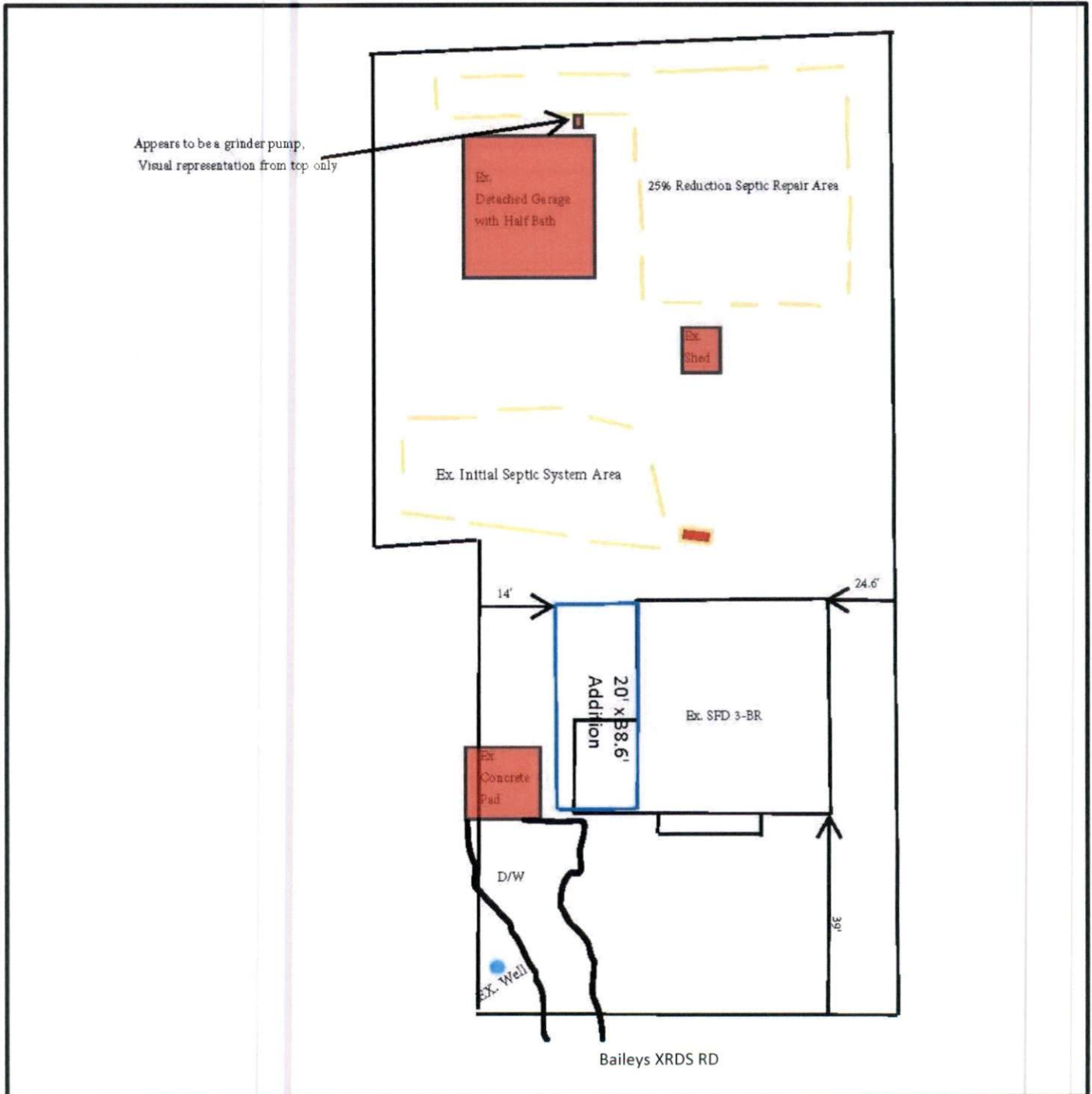
EXISTING SYSTEM APPROVAL SITE SKETCH

Operation Permit/ATO #: BRES2506-0059

PIN/Lot Identifier: 1610-92-1342.000 Part of Lot 4&5

Owner: TEMPLE JOSHUA AARRON & TEMPLE DEANNE NICOLE

Property Location/Address: 2635 BAILEYS XRDS RD BENSON, NC 27504



**Include the existing and proposed structures and applicable setbacks.*