ile/Permit #:	BRES2507-0055
---------------	---------------

Harnett County Environmental Health

EXISTING SYSTEM APPROVAL

■ Existing System Approval		
Name of the last o	nt addition with no DDF or wastewater strength increase	
Reconnection when the proposed facility is in t	5 50 00 00 00 00 00 00 00 00 00 00 00 00	
☐ Construction Authorization/Notice of Intent to Constru		
Control Control (Control Control Contr	e footprint as existing/previous facility pursuant to Session Law 2023-77, Section 5.(c)]	
	reconnections outside of footprint pursuant to Session Law 2023-77, Section 5.(c)]	
Applicant: Alvin West	Owner: Same	
Mailing Address: 2481 Bethel Baptist Rd	Mailing Address:	
	_	
City: Spring Lake	City:	
State: NC Zip: 28398	State: Zip:	
Phone #:	Phone #:	
Email: raywest748@gmail.com	Email:	
PIN/Lot Identifier: 0534-37-4099.000		
Property Location/Address: 2449 Bethel Baptist Rd	_	
Facility Type: House/Modular Mobile/Manufactured Home Business Other:		
Operation Permit/ATO #: Design	gn Daily Flow: 360 GPD 360	
Number of Bedrooms: 3 Max # Occupants: 6 Other:		
Wastewater Strength: Domestic High Strength		
wastewater strength. 🖴 Domestic 🗀 High strength	Industrial Process Wastewater	
Water Supply: Private well Public well Share	ed well Municipal Supply Spring Other:	
Proposed Property Improvement:		
Troposed Property Improvement.		
All the following must be checked for approval:		
No current or past uncorrected malfunction of the sy	stem as described in 15A NCAC 18E .1303(a)(2)	
DDF and wastewater strength for the proposed facilit	ty or site modification do not exceed that of the existing system	
Proposed facility or site modification meets the setba	acks in Section .0600 of 15A NCAC 18E	
Approval Conditions:		
Approval Conditions:		
Inspector's Printed Name Oliver Tolksdood REHS	Inspector Certification #:	
Inspector's Signature: Q2715	Date: 7/24/25	
, , , , ,		

The existing system approval expires one year after the date of issuance.

See attached site sketch