

North Carolina Onsite Wastewater Contractor Inspector Certification Board Authorized Onsite Wastewater Evaluator Permit Option for Non-Engineered Systems Notice of Intent (NOI) to Construct

	<u> </u>	_New	Expansion	Repair	Relocation	Relocation of Repair Area
Owner or Legal Roname: Mattamy I Mailing address: 1 Phone: 919-625-8	Home 11000	s, LLC Regency	Parkway, Sui			State: NC Zip: 27518
Authorized Onsite Name: Hal Owen Mailing address: Phone: 910-893-6	n PO Bo	ox 400		City:	Lillington	ation #: 10036E State: NC Zip: 27546
Site Location Information Site address: Bering Tax parcel identification Lot 16 Ph 1, Riversity 10 Ph 1, Riv	ng Cir	r, Angier, N	subdivision lo		ber of property: County: Harn	nett
System Information: Wastewater System Type: Illbg (Pump to Accepted Status 25% reduction) Daily Design Flow: 480 gpd Saprolite System: Yes V No Subsurface Operator Required: Yes V No Water Supply Type: Private Well Public Water Supply Spring Other:						
	Тур	e of Busine	ess and Basis fo	or Flow:	ccupants	
Required Attachmo	Plan	and Site F	eatures by Lice	ensed Soil So	cientist	
	NOI to e laws oire on	Construct and rules g	is accurate and coverning onsit of January,	d complete to e wastewater	the best of my k	by attest that the information required to be mowledge. Furthermore, I hereby attest that I tate of North Carolina.
Signature of Owne					rew Broa	ly
required (if any) to	the lo	cal health	department. A	n onsite was	tewater system au	omitting a complete NOI to Construct and the fee athorized by an authorized onsite wastewater donsite wastewater evaluator.
Local Health Departing Signature of Local						Date:



OP ID: SGW

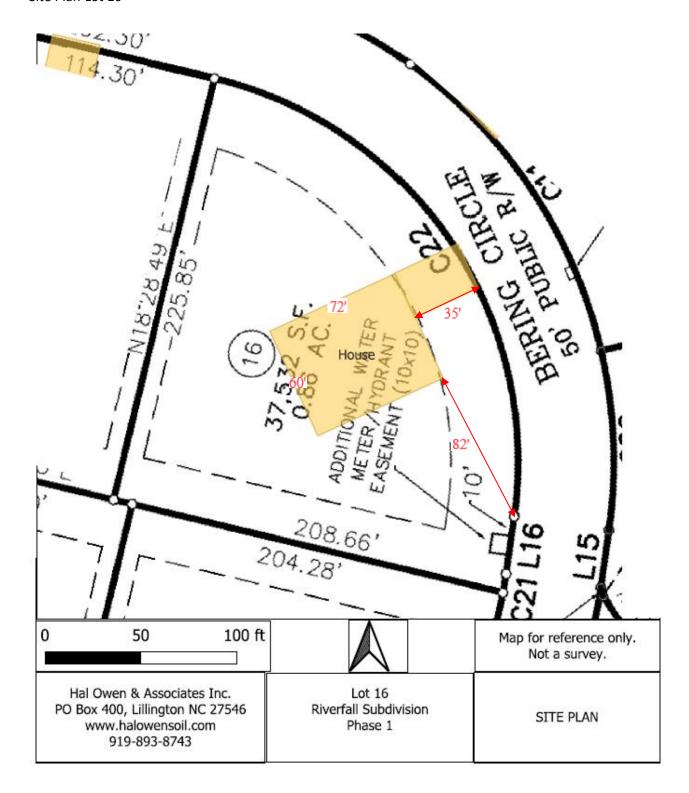


CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 12/05/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

lf	SUBROGATION IS WAIVED, subject nis certificate does not confer rights to	to th	ne te	rms and conditions of th	e polic	y, certain p	olicies may				
	DUCER	, 1110		0-893-5707	CONTA	CT SHARO	V WOODY				
INS	URANCE SERVICE CTR -LILLING LINGTON BRANCH OFFICE				PHONE	910-89	93-5707		FAX (A/C, No):	910-89	93-2077
PO	Box 1565				E-MAIL SWOODY@ISCFAY.COM						
	LINGTON, NC 27546 NIEL L. BABB				ADDRE			DING COVERAGE			NAIC#
ואט	VICE E. DABB				INCLIDE		TONE NAT				IVAIC#
INCI	IPED						TORL WATE	OTTAL			
HĂĹ	OWEN & ASSOCIATES, INC.				INSURE						
	BOX 400 INGTON, NC 27546				INSURE						
					INSURER D:						
					INSURE						
					INSURE	RF:					
	COVERAGES CERTIFICATE NUMBER:							REVISION NUM			
	HIS IS TO CERTIFY THAT THE POLICIES IDICATED. NOTWITHSTANDING ANY RE										
	ERTIFICATE MAY BE ISSUED OR MAY F										
	XCLUSIONS AND CONDITIONS OF SUCH I				BEEN F						
INSR LTR	TYPE OF INSURANCE	INSD	SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)		LIMIT	3	
	COMMERCIAL GENERAL LIABILITY							EACH OCCURREN		\$	
	CLAIMS-MADE OCCUR							DAMAGE TO RENT PREMISES (Ea occ	ED urrence)	\$	
								MED EXP (Any one	person)	\$	
								PERSONAL & ADV	INJURY	\$	
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREG		\$	
	POLICY PRO- JECT LOC							PRODUCTS - COM		\$	
	OTHER:								.,0.,,.00	\$	
	AUTOMOBILE LIABILITY							COMBINED SINGLE	LIMIT	\$	
	ANY AUTO							(Ea accident) BODILY INJURY (Po	or norson)	\$	
	OWNED SCHEDULED AUTOS ONLY										
	HIRED NON-OWNED AUTOS ONLY							PROPERTY DAMAG (Per accident)		\$	
	AUTOS ONLY AUTOS ONLY							(Per accident)		\$	
	UMBRELLA LIAB OCCUR									\$	
	UMBRELLA LIAB OCCUR EXCESS LIAB CLAIMS-MADE							EACH OCCURREN	CE	\$	
								AGGREGATE		\$	
	DED RETENTION \$							PER	OTH-	\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY							PER STATUTE	OTH- ER		
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A						E.L. EACH ACCIDE	NT	\$	
	(Mandatory in NH) If yes, describe under							E.L. DISEASE - EA	EMPLOYEE	\$	
_	DÉSCRIPTION OF OPERATIONS below			4050000440004		04/07/0000	04/07/0004	E.L. DISEASE - POI	LICY LIMIT	\$	4 000 000
Α	PROFESSIONAL LIAB.			42ESP00143901		01/2//2023	01/27/2024				1,000,000
								AGGREGATE			2,000,000
DES	CRIPTION OF OPERATIONS / LOCATIONS / VEHICL	ES (A	ACORE	D 101, Additional Remarks Schedu	le, may b	e attached if mo	re space is requir	red)			
CE	RTIFICATE HOLDER				CANC	ELLATION					
UE	NIIFICATE FIOLDER				CAN	LLLATION					
	MATTAMY HOMES, LLC	ст	E 4	10	THE	EXPIRATION	N DATE THE	ESCRIBED POLICE EREOF, NOTICE CY PROVISIONS.			
	11000 REGENCY PRKWY CARY, NC 27518	, J1	<u> '</u>	10	AUTHO	RIZED REPRESE	NTATIVE				
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					Danson H. Elandy						



HAL OWEN & ASSOCIATES, INC.

SOIL & ENVIRONMENTAL SCIENTISTS

P.O. Box 400, Lillington NC 27546-0400 Phone (910) 893-8743 / Fax (910) 893-3594

www.halowensoil.com

25 January 2024

Mattamy Homes, LLC 11000 Regency Parkway, Suite 110 Cary, NC 27518

Reference: AOWE Evaluation

Bering Cir, Angier, Harnett Co., NC

Lot 16 Ph 1, Riverfall SD PIN 0682-29-4179.000

Dear Mattamy Homes LLC,

A soil and site evaluation has been conducted for the above referenced property for the purpose of permitting a subsurface sewage waste disposal system. **This LSS Evaluation is being submitted pursuant to and meets the requirements of G.S.130A-336.2.** This evaluation of soil conditions and site features is provided in accordance with G.S. 130A-335(e), the Rules for "Wastewater Treatment and Dispersal Systems-15A NCAC 18E", and local septic regulations (if any). This report represents my professional opinion as a Licensed Soil Scientist and Authorized Onsite Wastewater Evaluator.

This report shall be used to file a Notice of Intent to Construction a wastewater system with the Local Health Department within one year of the date of this evaluation. Failure to file an NOI before then shall result in the AOWE Evaluation to become void.

Continued To The Number 10036E



Sincerely,

Hal Owen

Senior Licensed Soil Scientist

Authorized Onsite Wastewater Evaluator

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SPECIAL TERMS AND CONDITIONS

This evaluation includes a signed and sealed soil and site evaluation, specifications, plans, and reports for the site layout and construction of a proposed onsite wastewater system by an Authorized On-Site Wastewater Evaluator (AOWE) in accordance with G.S. § 130A-336.2. This evaluation was prepared based on information provided by the owner of the proposed system; to include the basis for design flow, proposed structure location(s), and property boundaries. Any false, inaccurate, or incomplete information provided by the owner may result in denial or revocation of applications, approvals, or permits.

This evaluation is not a permit to develop. The owner and subcontractors will need to abide by all state and local rules and regulations pertaining to planning, zoning, and land use development.

<u>Notice of Intent to Construct</u> – The proposed wastewater system is not "permitted" until the owner files an application with the Local Health Department (LHD) and provides a complete Notice of Intent (NOI) to Construct a wastewater system using an AOWE. The owner may apply for a building permit for the project upon submitting a complete NOI and the required fee.

<u>On-Site Wastewater System Contractor</u> – The AOWE shall assist the owner in the selection of an on-site wastewater system contractor who shall be under contractual obligation to the owner and have sufficient errors and omissions, liability, or other insurance for the system constructed.

<u>Inspections, Construction Observations, and Reports</u> – The AOWE shall make periodic visits to the site to observe the progress and quality of the construction. Upon determining that the system is properly installed and capable of being operated in accordance with the conditions of the permit, the AOWE will issue an Authorization to Operate (ATO) and include an inspection report and a written operation and management program. The owner shall provide a complete ATO package and fee to the LHD, who will issue the certificate of occupancy for the facility.

<u>Operation and Management</u> – The owner shall be responsible for continued adherence to the operations and management program established by the AOWE. This permit shall in no way be taken as a guarantee or implied warranty that the septic system will function satisfactorily for any given period of time.

<u>Change in System Ownership</u>. – An authorized wastewater system shall be transferrable to a new owner with the consent of the AOWE. The new owner and the AOWE shall enter a contract for the wastewater system.

<u>Revocation</u> – The AOWE permit is subject to revocation if the site plan, plat, or the intended use changes. This permit is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit.

<u>Repair of Malfunctioning Systems.</u> – The owner may apply for an Improvement Permit and a Construction Authorization from the LHD or obtain a NOI from an AOWE to repair a malfunctioning wastewater system.

PROPOSED USE

A new single-family residence will be built at the site. The home will not have a basement. The proposed single-family residence will contain four bedrooms and have a design wastewater flow of 480 gallons per day. The maximum occupancy of the home is 8 people.

WATER SUPPLY

Public water supplies will be utilized.

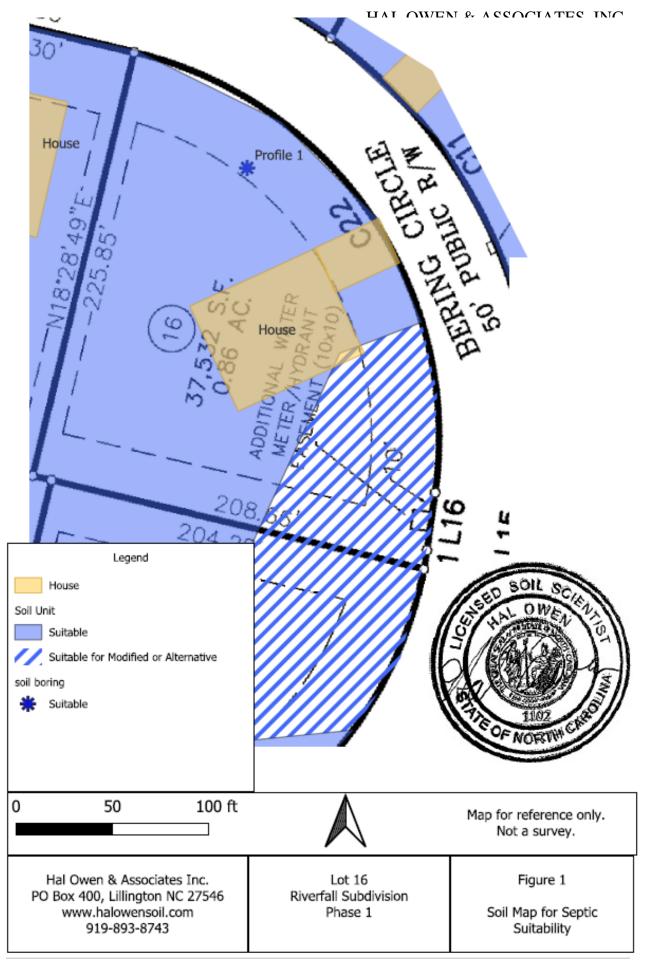
EXISTING SITE CONDITIONS

At the time of the investigation, the site had been cleared, lot corners were staked, and the new building footprint was marked by Hal Owen & Associates. No existing wells, streams, or wetlands were observed within 50 feet of the proposed septic system and repair area. There is a water meter/hydrant easement at the front of the property.

SOIL AND SITE INVESTIGATION

The soils were evaluated under moist soil conditions through the advancing of auger borings. This evaluation included observations of topography and landscape position, soil morphology (texture, structure, clay mineralogy, organics), soil wetness, soil depth, and restrictive horizons. Descriptions of the soil borings located within the investigated portions of the site are provided in the attached Soil/Site Evaluation form.

Soils in the proposed system area were observed to rate as suitable for subsurface sewage waste disposal systems. (Figure 1). The subsoils were observed to be friable sandy loams to about 37 inches, underlain by a friable sandy clay loam layer that extended to greater than 48 inches below ground surface. Evidence of a soil wetness condition was observed at 41 inches below surface or deeper. These soils appear adequate to support long-term acceptance rates of $0.6 \, \mathrm{gal/day/ft^2}$ for conventional drainlines.



Soil/Site Evaluation Form for On-Site Wastewater System

OWNER N	OWNER NAME: Mattamy Homes, LLC OWNER ADDRESS: 11000 Regency Parkway, Suite 110								
PROPOSEI	FACILITY	Residentia	1 P	ROPOSED DES	IGN FLOW:	480 ROPERTY SIZE:	0.86		
LOCATION	N OF SITE:	Bering Cir	, Angier, NC			PIN: 0682-29-4179.0	00		
WASTEWA	ATER TYPE:	Domestic				COUNTY: Harnett			
WATER SU	JPPLY:	Public Wat	ter	WATE	R SUPPLY	SETBACK: 10	_		
EVALUAT	VALUATION METHOD: AUGER BORING X PIT CUT								
EVALUAT	EVALUATED BY: Hal Owen, LSS 1102 and Steven Boor DATE EVALUATED: 10/24/2023								
			INITIAL SY	YSTEM		REPAIR SYSTE	M		
AVAILA	BLE SPACE	600	ft ² trench b	ottom		600 ft ² trench bottom	1		
SYS	STEM TYPE			on) System		Accepted (25% reduction) System		
	SITE LTAR	0.60	gpd/ft ²			0.60 gpd/ft ²			
MAX TREN	ICH DEPTH	24	inches (mea	sured on downh	ill side)	24 inches (measured	on downhill side)		
SITE CLAS	SIFICATION	Suitable			OTHE	R FACTORS			
C	OMMENTS								
PROFILE	1								
HORIZON	COLOR	CONSIS	TEXTURE	STRUCTURE	MINERA	OTHER PROFILE FAC	CTORS		
DEPTH		TENCE			LOGY				
0-7	10YR 5/3	VFR	SL	GR	SEXP	LANDSCAPE POSITION	L		
7-18	10YR 7/4	VFR	SL	GR	SEXP	SOIL WETNESS DEPTH	41"		
18-23	10YR 5/8	FR	SCL	SBK	SEXP	SOIL WETNESS COLOR			
23-37	10YR 6/8	FR	SL	SBK	SEXP	SOIL DEPTH	48"		
37-48	10YR 5/8	FR	SCL	SBK	SEXP	SAPROLITE CLASS	NA		
						RESTRICTIVE HORIZON	NA		
						SLOPE %	3		
PROFILE C	CLASSIFICA	TION	Suitable	LTAR gpd/ft ²	0.6	SLOPE CORRECTION (IN)	1.1		
COMMEN'	Γ								

LEGEND OF ABBREVIATIONS FOR SITE EVALUATION FORM

	TEXTURE	TEXTURE		<u>.1955 LTAR</u>
LANDSCAPE POSITION	GROUP	<u>CLASS</u>		(gal/day/sqft)
CC - Concave Slope	I	S - Sand		1.2-0.8
CV - Convex Slope		LS - Loamy Sand		
DS - Debris Slump				
D - Depression	II	SL - Sandy Loam		0.8 - 0.6
DW - Drainage Way		L - Loam		
FP - Flood Plain				
FS - Foot Slope	III	SCL - Sandy Clay I	_oam	0.6 - 0.3
H - Head Slope		CL - Clay Loam		
L - Linear Slope		SiL - Silt Loam		
N - Nose Slope		Si - Silt		
R - Ridge		SiCL - Silt Clay Loa	ım	
S - Shoulder Slope				
T - Terrace	IV	SC - Sandy Clay		0.4 - 0.1
TS - Toe Slope		C - Clay		
		SiC - Silty Clay		
		O - Organic		none
STRUCTURE	MOIST CONSIST			<u>SISTENCE</u>
G - Single Grain	VFR - Very Fria	able	NS - No	on Stick
M - Massive	FR - Friable			ghtly Sticky
CR - Crumb	FI - Firm			oderately Stick
GR - Granular	VFI - Very Firm	n	VS - Ve	ery Sticky
SBK - Subangular Blocky	EFI - Extremel	y Firm		
ABK - Angular Blocky			NP - No	on Plastic
PL - Platy	MINERALOGY		SP - Sli	ghtly Plastic
PR - Prismatic	SEXP - Sligh	tly Expansive	MP - Mo	oderately Plastic
	EXP - Expa	nsive		
MOTTLES				
f - few 1 - fine		F - Faint		
c – common 2 – medi	um	D - Distinct		
m - many 3 - coars	e	P - Prominent		

Give Horizon Depth in inches below natural soil surface and Fill Depth in inches above land surface. Depth to Soil Wetness: inches below land surface to free water or to soil colors with chroma 2 or less. Classification: S-Suitable U-Unsuitable

SEPTIC SYSTEM DESIGN

See section *Wastewater Treatment System Plans* and Figure 2 for a diagram of the septic system layout and design specifications.

A 1000 gallon (at minimum) septic tank and an approved septic effluent filter is required. A pump tank (1000 gallon at minimum) is required to lift effluent to the nitrification field. The pump tank may be eliminated if gravity distribution can be demonstrated.

The initial septic system is proposed as a gravity driven system to 200 linear feet of Accepted Status drainlines utilizing a 25% reduction in total drainline length (Figure 2). A long-term application rate (LTAR) of 0.6 gal/day/ft² was used to design the nitrification field. Effluent will be serially distributed to three unequal length drainlines. The drainlines shall be installed on contour with maximum trench bottom depths at 24 inches below surface (as measured on low side).

The repair septic system is proposed as a pump driven system to 200 linear feet of Accepted Status drainlines utilizing a 25% reduction in total drainline length (Figure 2). A long-term application rate (LTAR) of 0.6 gal/day/ft² was used to design the nitrification field. A pressure manifold will be used to deliver effluent in parallel distribution to two 100-ft long drainlines. The drainlines shall be installed on contour with maximum trench bottom depths at 24 inches below surface (as measured on low side).

SEPTIC AREA PREPARATION

It is important that you do not disturb the septic areas during site construction. A staked line or protective fence should be placed around the system areas prior to construction to eliminate any potential damage to the soil or the layout of the system. Septic areas should not be used for staging construction materials or subjected to vehicular traffic. Do not cut, grade, fill, install utilities, or otherwise alter the designated septic areas.

Care should be taken when clearing vegetation from the septic area. Work should only occur when the soil is at the appropriate moisture content to limit the impact to the soil structure in the soil treatment area. Do not scrape the ground inside the drainfield. **Any clearing or preparation of the septic areas shall be done without removal, disturbance, or compaction of the soil.**

PERMIT CONDITIONS

Standard Conditions

The requirements of 15A NCAC 18E are incorporated by reference into this permit and shall be met.

System shall be installed in accordance with the attached Wastewater Treatment System Plans.

Any changes to the site plan or intended use must be approved by Hal Owen & Associates. Permit modification and resubmittal to the LHD may be necessary to ensure regulatory compliance.

Conformance to all regulatory setbacks shall be maintained. Local regulations (such as well or riparian buffer ordinances) may require more stringent setbacks.

Minimum soil cover of six inches shall be established over nitrification field. Soil cover above the original grade shall be placed at a uniform depth over the entire nitrification and shall extend laterally five feet beyond the nitrification trench. Site shall be graded to shed water away from field and a vegetative cover established to prevent erosion.

The nitrification field and repair area shall not be subject to vehicular traffic. Vehicular traffic can damage soils, pipes, and valve boxes. Do not use septic areas for parking.

Do not allow underground utilities, water lines, or sprinkler systems to be installed in the septic areas. Damage to the septic areas could result in the septic permit being revoked.

The wastewater system shall not be covered until inspected by Hal Owen & Associates and shall not be placed into use until an Authorization to Operate is issued.

Specific Conditions:

• To ensure a watertight joint, the inlet and outlet of all tanks shall be equipped with an approved pipe penetration boot.

WASTEWATER TREATMENT SYSTEM PLANS

PROJECT INFORMATION

Wastewater System	New		.0403 Eng Low Flow	No
Wastewater Strength	Domestic			
Effluent Standard	DSE			
Water Supply	Public Water			
Facility Type	Residential			
Design Wastewater Flow	480	gpd	gal/unit	120
Basis for Flow	4	bedrooms	max occupancy	8
Basement	No		Fixtures in basement?	No
Crawl Space	No		Slab Foundation	Yes

PROPERTY INFORMATION

County	Harnett
Site Address	Bering Cir, Angier, NC
S/D Name and Lot#	Lot 16 Ph 1 Riverfall SD
PIN	0682-29-4179.000
County PID	040682 0131 18
Size (Acre)	0.86

APPLICANT INFORMATION

Name	Mattamy Homes, LLC
Mailing Address	11000 Regency Parkway, Suite 110
	Cary, NC 27518
Telephone Number	919-625-9546
E-mail Address	Drew.Brody@mattamycorp.com

CONSULTANT INFORMATION

Company Name	Hal Owen & Associates, Inc.
Mailing Address	PO Box 400, Lillington, NC 27546
Telephone Number	910-893-8743 Fax: 910-893-3594
E-mail Address	hal@halowensoil.com
Licensed Soil Scientist	Hal Owen, LSS #1102 and AOWE# 10036E
System Designer	Jocelyn Proulx

Septic System Design Specifications

Proposed Design Daily Flow	480	gpd	Drainfield Meeets Requ	uirements:
Septic Tank Size (minimum)	1000	gallons	.0508 Available Space	Yes
Pump Tank Size (minimum)	1000	gallons, if required	.0601 Setbacks	Yes

Initial System *See Detailed Design Parameters

Design LTAR 0.60 gal/day/ft² Saprolite System No
Total Trench/ Bed Length 200 feet Fill System No
Trench Spacing 9 ft on center

Usable soil depth to LC

Maximum Trench Depth

Artificial Drainage Required

Mo

Inches

Soil Cover 6 inches

inches, measured on downhill side of trench

No

Repair System

System Type: IIIbg –Pump to Other non-conventional systems

Trenches: Accepted (25% reduction) System

Design LTAR

0.60 gal/day/ft² Saprolite System No

Total Trench/ Bed Length 200 feet Fill System No

Trench Spacing 9 ft on center

Usable soil depth to LC 9 ft on center inches

Maximum Trench Depth of 24 inches, measured on downhill side of trench

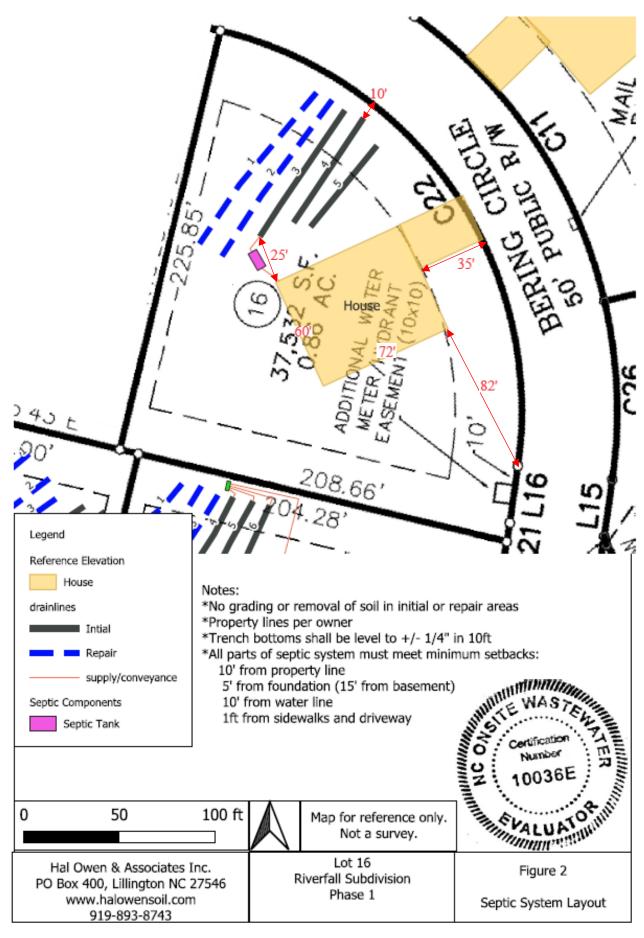
Pump Required Yes

Potential Drainlines flagged at site on 9-ft centers.

		Relative	Drainline	Field
Line #	Color	Elevation (ft)	Length(ft)	Length(ft)
1	R	98.25	100	102
2	Y	97.94	100	112
3	В	97.70	80	80
4	W	97.40	65	65
5	R	96.99	55	55
Septic Tank:		97.70		
Reference	e Elev:	100.00		

Notes:

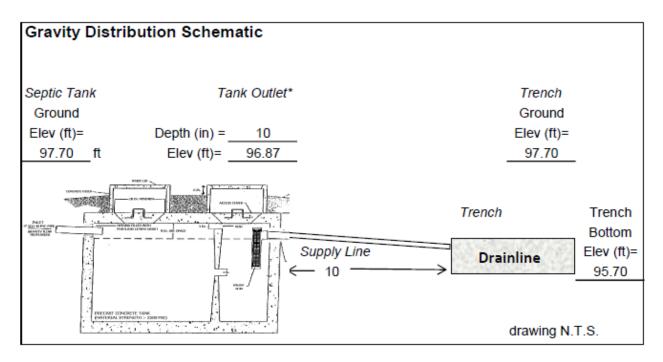
- *No grading or removal of soil in initial or repair areas
- *Property lines per owner
- *Trench bottoms shall be level to +/- 1/4" in 10ft
- *All parts of septic system must meet minimum setbacks



Initial System Specifications

Gravity System Design Criteria

DESIGN DAILY FLOW 480 gallons SOIL LTAR: 0.60 gpd/ft² TANK (minimum) Septic Tank: 1000 gallons SUPPLY LINE Length (ft): 10 Diameter: 3 "sch 40 pvc slope = 1.67% *minimum slope of supply line is 1/8" per foot (%1.04) TRENCHES Drainline Type: Accepted (25% reduction) System Maximum Trench Depth of inches, measured on downhill side 24 Trench height: 12 inches Trench width: 3 Trench Length Factor: 75 Effective Trench Width: % 600 ft² Absorption Area: Minimum Linear Length: 200 Actual Trench Length: Х 200 ft



^{*}Outlet depth of septic tank is dependant upon the depth of the plumbing stub out from the home. A pump tank should be added if gravity distribution cannot be demonstrated.

Repair System Specifications

DESIGN FLOW	480 gal/day	SOIL LT	AR: 0.60	gpd/ft ²						
TANKS (minimum)	Septic Tank: _	1000 gallons	Pump Tank:	1000	gallons					
TRENCHES Drainli	TRENCHES Drainline Type: Accepted (25% reduction) System									
Maxim	num Trench Depth of _	24 inches,	measured on low	side of trend	ch					
Trend	ch width: 3 fe	eet Effectiv	e Trench Width:	4	ft					
Absorpti	on Area: 600 ff	t ² Minim	um Linear Length:	200	ft					

PRESSURE MANIFOLD DESIGN CRITERIA

MANIFOLD # Taps 2 Tap Configuration: 6in. spacing, 1 side of manifold

Length (ft): 2.5 Diameter: 4" sch 80 pvc Elevation: 99.25

TAP CHART

Тар	Line		Relative	Drainline	Tap Size/	Flow/tap	LTAR
#	Number	Color	Elevation	Length(ft)	Schedule	(gpm)	(gpd/ft ²)
1	1	R	98.25	100	3/4"sch 40	12.50	0.800
2	2	Y	97.94	100	3/4"sch 40	12.50	0.800

Total Drainline: 200 Total Flow: 25.00

Target LTAR*: 0.80 LTAR + 5%: 0.840

PUMP CALCULATIONS

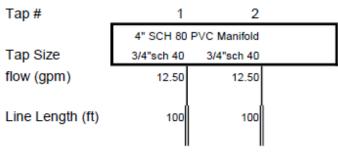
Total Flow: _____gpm Design Head (ft): _____2.0

Daily Pump Run Time: 19.20 min (Daily Flow/Total Flow)

Dose Volume: 97.95 gallons with Pipe Volume at 75 % (65.3gal/100ft pipe)

Dose Pump Run 3.92 minutes (Dose Volume/Total Flow)

MANIFOLD DIAGRAM:



^{*} Target LTAR: Convert LTAR for non-conventional drainline types by dividing by trench length factor