MACON COUNTY PUBLIC HEALTH CENTER

Franklin, North Carolina 28734

SUBSURFACE SEWAGE SYSTEM OPERATIONS PERMIT - TYPES II-IV

☒ New Installation ☐ Addition to Existing System ☐ Partial Repair ☐ 100% Repair

☐ Single family dwelling(s)_____ # ☐ Multi-family dwelling ☒ Commercial (type) Workshop

Total # bedrooms_____ Daily Flow: (Gallons per day): 100 GPD

Property Owner: David S. McCurdy

Property Description: Off Wide Horizon Drive

Township Franklin Parcel ID Number 01-28593 Map Number 6593.03-04-2085

Type of System Chambered System Classification III

Septic Tank Size 1000 Pump Tank Size ——— Trench Bottom Depth 24" LS LTAR .5

Drinking Water Source: ☒ Individual Well/Spring ☐ Shared Well/Spring ☐ City ☐ Community

Future Repair Area Required ☒ Yes ☐ No Type of System for Future Repair Chambered or 25% Reduction

Date Improvements Permit/Authorization to construct issued 12-9-02 Permit No. ———

Installer Chuck Bates Design Engineer ——— Project Number ———

Inspection Frequency: Health Dept._____ Mgt. Entity_____ Mgt. Entity Reporting Frequency_____

Cautions or Comments:_____

The following checked items are on file and are part of this Operations Permit:

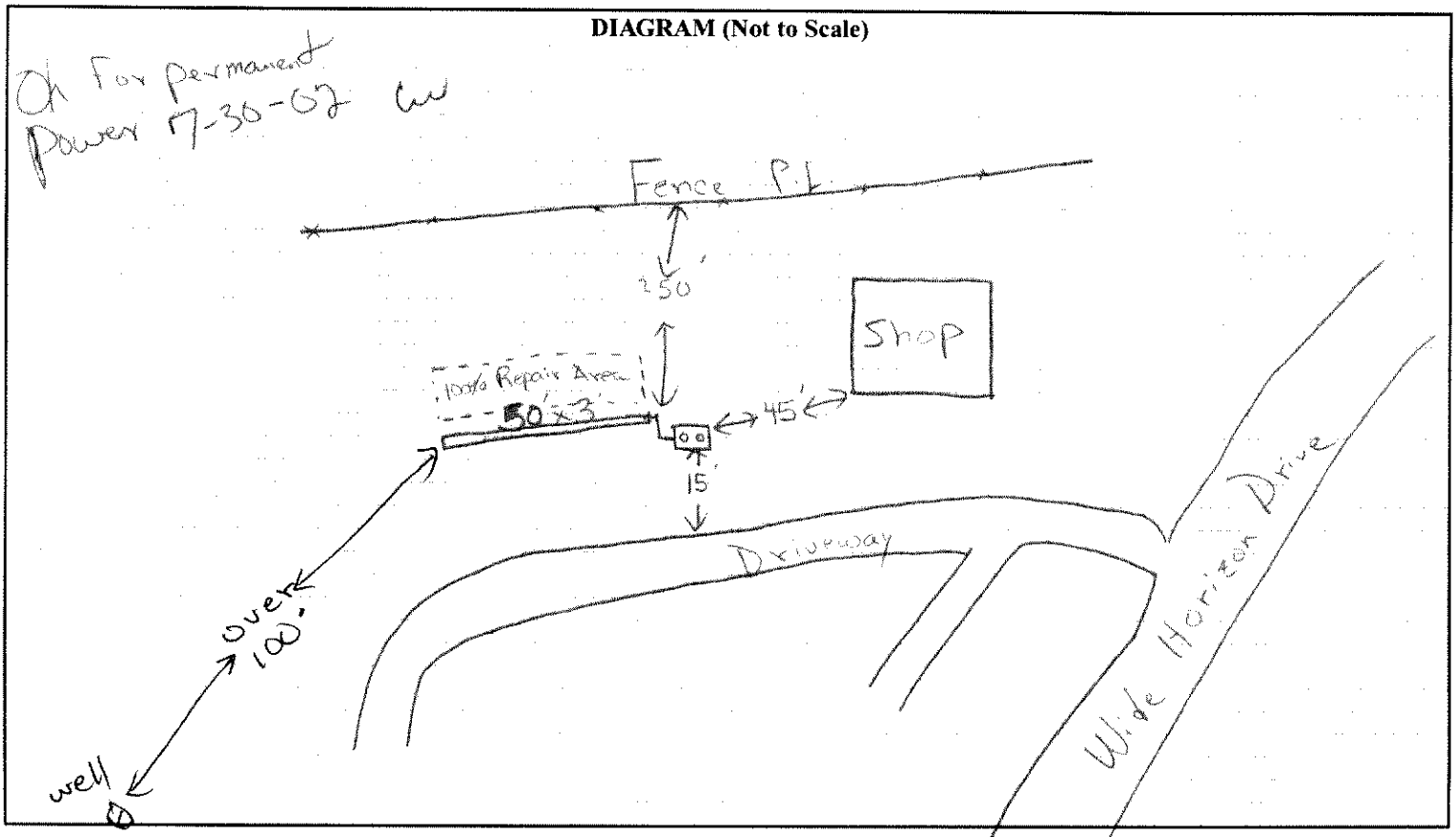
☒ Application ☒ Improvement Permit ☒ Survey/Plat Map ☐ Engineer's Drawing

☐ Soil Data Sheet ☒ Authorization To Construct ☒ Map (Other) ☐ Zoning Permit

☐ Other_____

DIAGRAM (Not to Scale)

Ok for permanent power 7-30-02 cw



A representative of the Macon County Public Health Center has inspected this sewage disposal system and finds that it conforms to state guidelines. This permit is issued subject to all the provisions of the North Carolina Laws and Rules for Sewage Treatment and Disposal. **No person is permitted to make alterations to this system without the approval of an authorized Environmental Health Specialist.** This approval indicates that this system has been installed in compliance with the standards as set forth in the above regulations, but shall in no way be taken as a guarantee that the system will function satisfactorily for any given period of time. **The area designated as "repair area" is required for future use and must remain undisturbed.**

7-30-02
Date Inspected

Charles Womack RS
Environmental Health Specialist

White-Owners's Copy Yellow-Health Dept. Copy Pink-Building Inspection Dept. Copy