



**PERMIT TO CONSTRUCT
Onsite Wastewater System**

File Nbr **2022120003**
County: **Orangeburg**

Name: TYLER SGRO
Type Facility: MOBILE HOME
Subdivision:
Block: Lot:

Address:
NORTH CHARLESTON, SC 29405
Site: FOX PAW CT
BRANCHVILLE, SC

Program Code³⁶²
System Code: 290
TM No.: 189-00-03-005
Water Supply: PUBLIC

PERMIT TO CONSTRUCT SYSTEM SPECIFICATIONS

Daily Flow (gpd): 480
LTAR: .50
Min Pump Capacity:

Tank Sizes (gal): Septic Tank: 1000 Pump Chamber: Grease Trap:
Trenches: Length (ft): 174 Width (in): 120 Max. Depth (in): 16 Agg. Depth (in): 6
gpm at ft. of Head Alternative Product:

SPECIAL INSTRUCTIONS/CONDITIONS

THIS PERMIT IS SITE SPECIFIC. ANY CHANGES TO THE SYSTEM MUST BE APPROVED BY DHEC. ALTERNATIVE TRENCH PRODUCTS APPROVED UNDER STATE RULES AND REGULATIONS MAY BE SUBSTITUTED. ANY UNAPPROVED CHANGES WILL VOID THIS PERMIT.

Installers must contact the local Environmental Affairs office by 10:00 AM the day before installation to schedule a time for the final inspection. If a Department representative does not arrive within 30 minutes of the schedule time, the installer may complete the final inspection. When a contractor self-inspection occurs, the installer must complete the DHEC form 3978, Approval to Operate Contractor Self-Inspection. The installer must submit the DHEC form 3978 to the Department within 2 business days of completion of the installation.

See Attached Page...

PERMIT TO CONSTRUCT SYSTEM DIAGRAM

(NTS)

See attached design

Issued/Revised By: Tee Thompson

Date: 12/12/2022

This Permit is Appealable Under the Administrative Procedures Act.

This permit will expire and become null and void five (5) years from the issuance date.

There may be an Additional Fee for Changes in this Permit that Require a Site Reevaluation.



**PERMIT TO CONSTRUCT AND OPERATE
Onsite Wastewater System**

File Number: 2022120003
County: Orangeburg

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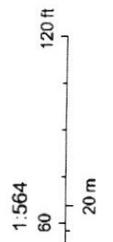
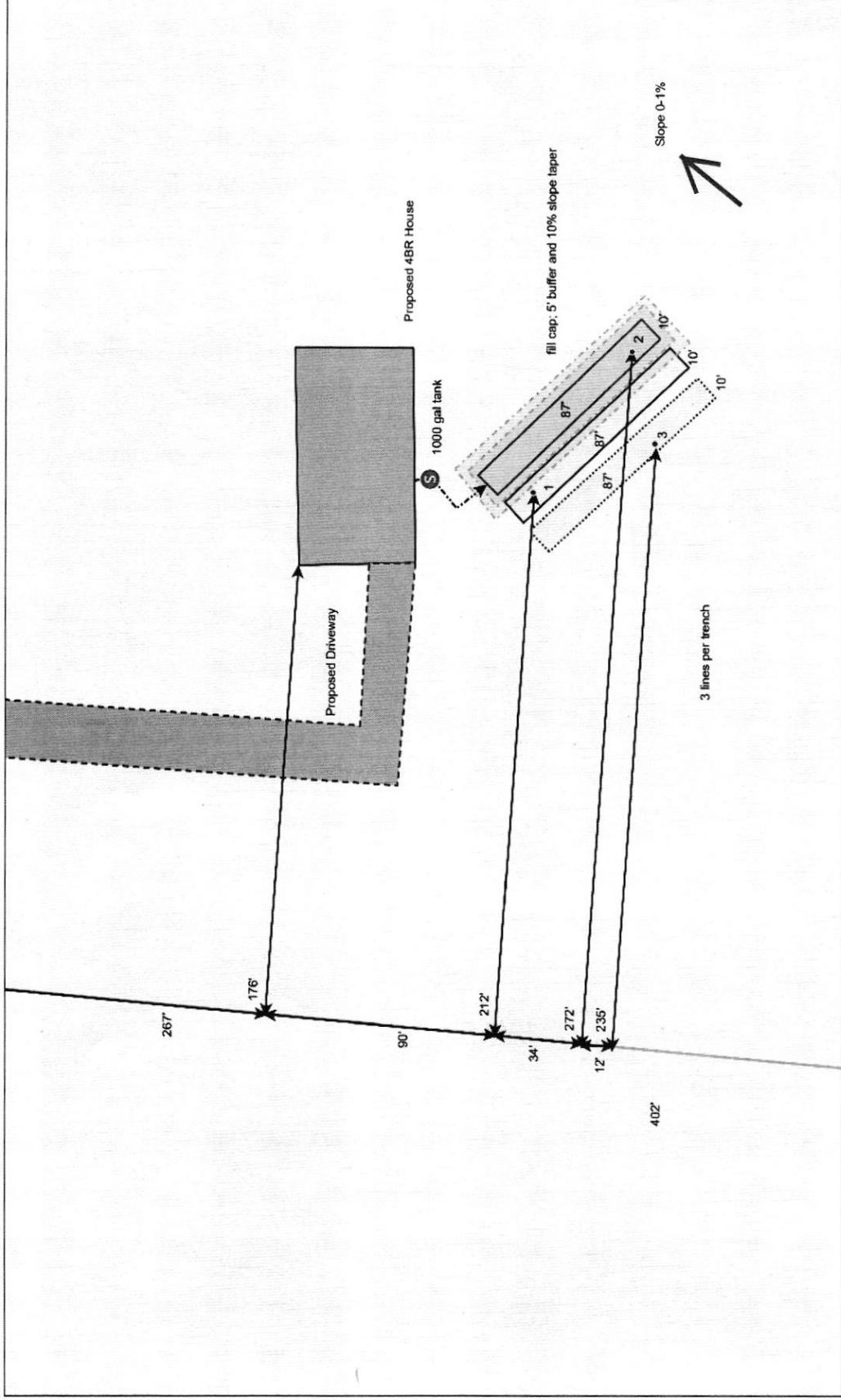
- All applicable setbacks set forth in Regulation 61-56 apply.
- Do not install under wet conditions.
- Do not cut, fill, bulldoze, scrape or change the grade of the natural soils in the septic system area.
- Minimum 12" cover over system before approval -5' buffers & 10% slope tapers from ends & sides of trenches.
- No parking, driving, building or paving over the area of septic system after installation.
- Pre-construction conference required for property owners who wish to install their own system.
- Permit issued based on soil work and system recommendations from Tyler Sgro, PSC #119.

Issued/Revised By: *Tee Thompson*

Date: 12/12/2022

Phillip - Fox Paw Court

Please note that this site map is not considered final until final permit to construct issuance from SCDHEC. Upon permit issuance, any deviations during the installation process relating to the drainfield area should be initially coordinated with Davis Horizons and approved by SCDHEC. To contact Davis Horizons about changes to the drainfield area please call 843-754-6307, or contact the applicable local/regional SCDHEC office.



- Soil Data Form Septic_Design_804 Septic_Design_9782
- Septic_Design_8153
- Septic Tank
- Distance/Setback
- Distribution Line
- Drain Lines
- House
- Driveway
- Repair Lines
- Fill Cap

Esri, Community Maps Contributors, OpenStreetMap, Microsoft, Esri, HERE, Garmin, SafeGraph, GeoTechnologies, Inc, METI/NASA, USGS, EPA, NPS, US Census Bureau, USDA



APPROVAL TO OPERATE

Department Staff Inspection - Onsite Wastewater System

File Nbr: **2022120003**

County: **Orangeburg**

Name: TYLER SGRO
Type Facility: MOBILE HOME
Subdivision
Block: Lot:

Address:
NORTH CHARLESTON, SC 29405
Site: FOX PAW CT
BRANCHVILLE, SC

Program Code: 362
System Code:
TM No. 189-00-03-005
Water Supply: PUBLIC

ACTUAL INSTALLATION

(NTS)

FINAL APPROVAL

Installer:	
Septic Tank Mfg:	Tank Size (gal):
Pump Chbr Mfg:	Pump Chamber Size (gal):
Pump Mfg:	
Pump Model:	Elevation Readings:
Grease Trap Mfg:	Plumbing Stubout:
Alternative Product:	Septic Tank Inlet:
Aggregate Type:	Septic Tank Outlet:
Aggregate Depth (in):	Pump Chamber Inlet:
Trench Width (in):	Line No.
Trench Depth (in):	_____
Fill Cap:	_____
Fill Cap Depth (in):	_____
Well Installed:	_____
Well Dist (ft):	_____
Building Dist (ft):	_____
Property Dist (ft):	_____
Water Dist (ft):	_____

Comments:

Licensed Installer
Printed Name _____ License No. _____

I hereby certify the system was installed in accordance with the referenced permit and R.61-56 and is in an exposed condition ready for inspection.

Licensed Installer Signature _____ Date _____

Office Use Only

APPROVAL BY DHEC TO OPERATE

THIS CERTIFICATE OF FINAL APPROVAL IN NO WAY GUARANTEES THE LIFE OF THE SYSTEM OR THAT IT WILL FUNCTION PROPERLY UNDER ANY OR ALL CONDITIONS

Approved By: _____ Date: _____

Personal information provided on this form is subject to public scrutiny or release.