



PERMIT TO CONSTRUCT
Onsite Wastewater System

Permit ID: OSWW033521 v1.0

County: Orangeburg

Name: Justin Albright
Type Facility: Residential
Subdivision:
Block: Lot: lot 2

Site: Hebron Rd.,
Neeses, SC, 29107

Program Code: CONVENTIONAL
System Code: 100 CONVENTIONAL
TM #: 025303
Water Supply: Private Well

PERMIT TO CONSTRUCT SYSTEM SPECIFICATIONS

Daily Flow (gpd): 360 **Tank Sizes (gal):** Septic Tank: 1000 Pump Chamber: Grease Trap:
LTAR (g/d/ft²): .8 **Trenches:** Length (ft): 150 Width (in): 36 Max. Depth (in): 25 Agg. Depth (in): 14
Min Pump Capacity: GPM at ft. of Head

SPECIAL INSTRUCTIONS/CONDITIONS

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

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

Self-installations require a pre-construction conference with a Department representative.

PERMIT TO CONSTRUCT SYSTEM DIAGRAM

See System Diagram on page 2 of this document.

Issued/Revised By:

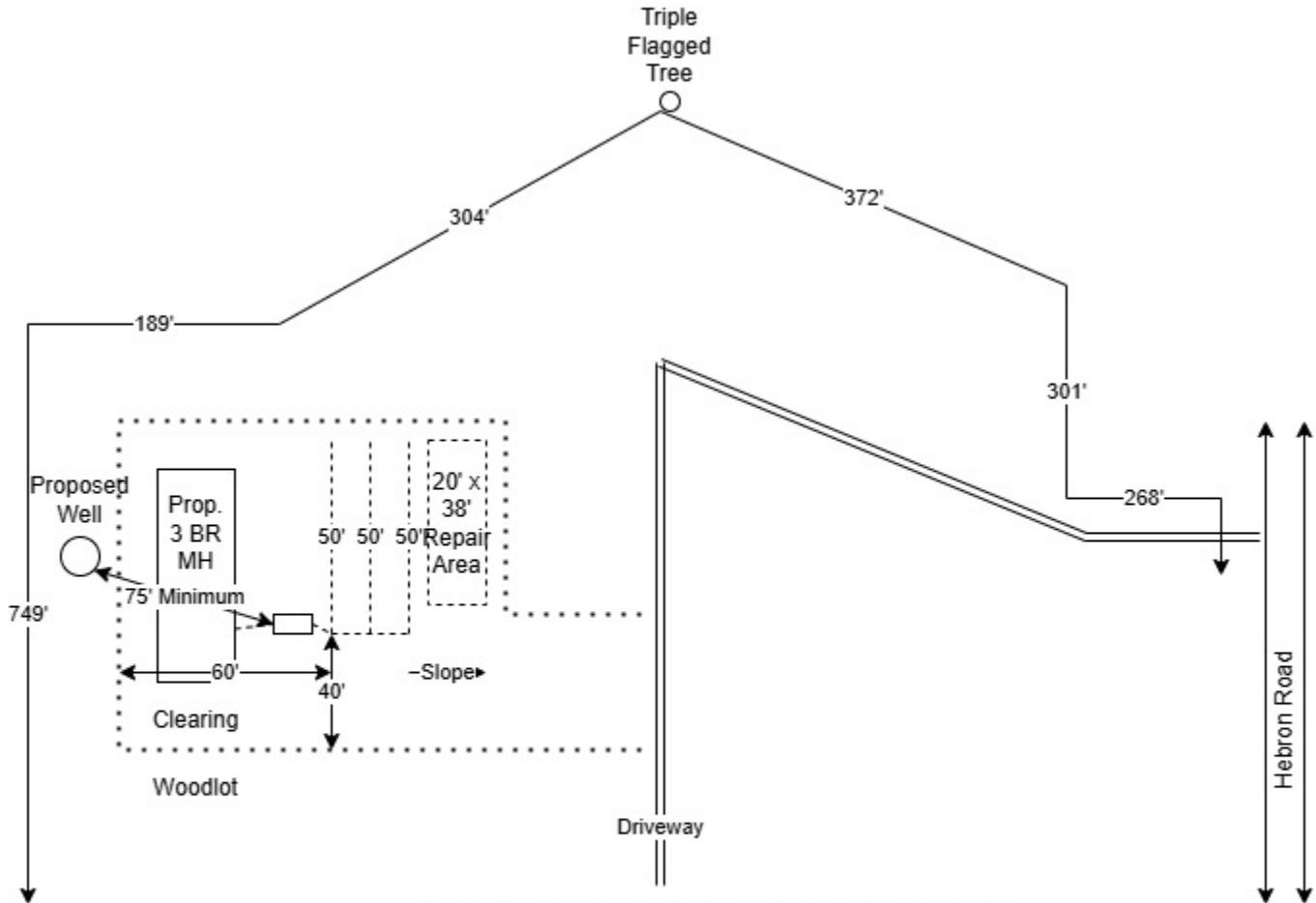
Date: April 21, 2025



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PERMIT TO CONSTRUCT SYSTEM DIAGRAM



OSWW033521, Justin Albright, Hebron Road Lot 2, Neeses
150' Total, 14" Aggregate, Maximum depth 25"
Minimum 75' from private well to system
Minimum 100' from public well to system
Not to scale
Part of 26.19 Acres

Final Inspection

Onsite Wastewater System

Instructions for Completing SCDES 4432

Purpose: This form should be utilized to record final installation of septic systems.

Audience: This form should be utilized by SCDES staff or a licensed septic system installer who will be conducting final inspections on septic systems.

Instructions:

1. Form must be completed as indicated and submitted to the Department.
2. If being completed by a licensed septic system installer, it must be submitted to the Department within two (2) business days of completing the system installation.
3. The abbreviations contained within this document are as follows:
 - a. TM #: Tax Map Number
 - b. No.: Number
 - c. NTS: Not to Scale
 - d. Mfr: Manufacturer
 - e. Alt: Alternative
 - f. Agg: Aggregate
 - g. Inst: Installed
 - h. Chmbr: Chamber
 - i. Dist: Distance
 - j. in: Inches
 - k. ft: Feet

Office Mechanics & Filing: This form is maintained under Retention Schedule 07335, Onsite Wastewater System Application and Permit Records.