



**PERMIT TO CONSTRUCT
Onsite Wastewater System**

File Nbr: **2022080011**
County: **Williamsburg**

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

Address: 4524 ORR ST
NORTH CHARLESTON, SC 29405
Site: WALLACE RD
LANE, SC

Program Code: 362
System Code: 290
TM No.: 45-111-109
Water Supply: PRIVATE

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): 8 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: *[Signature]*

Date: 9/8/22

DHEC 1781 (01/2014)

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.

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



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

File Number: 2022080011
County: Williamsburg

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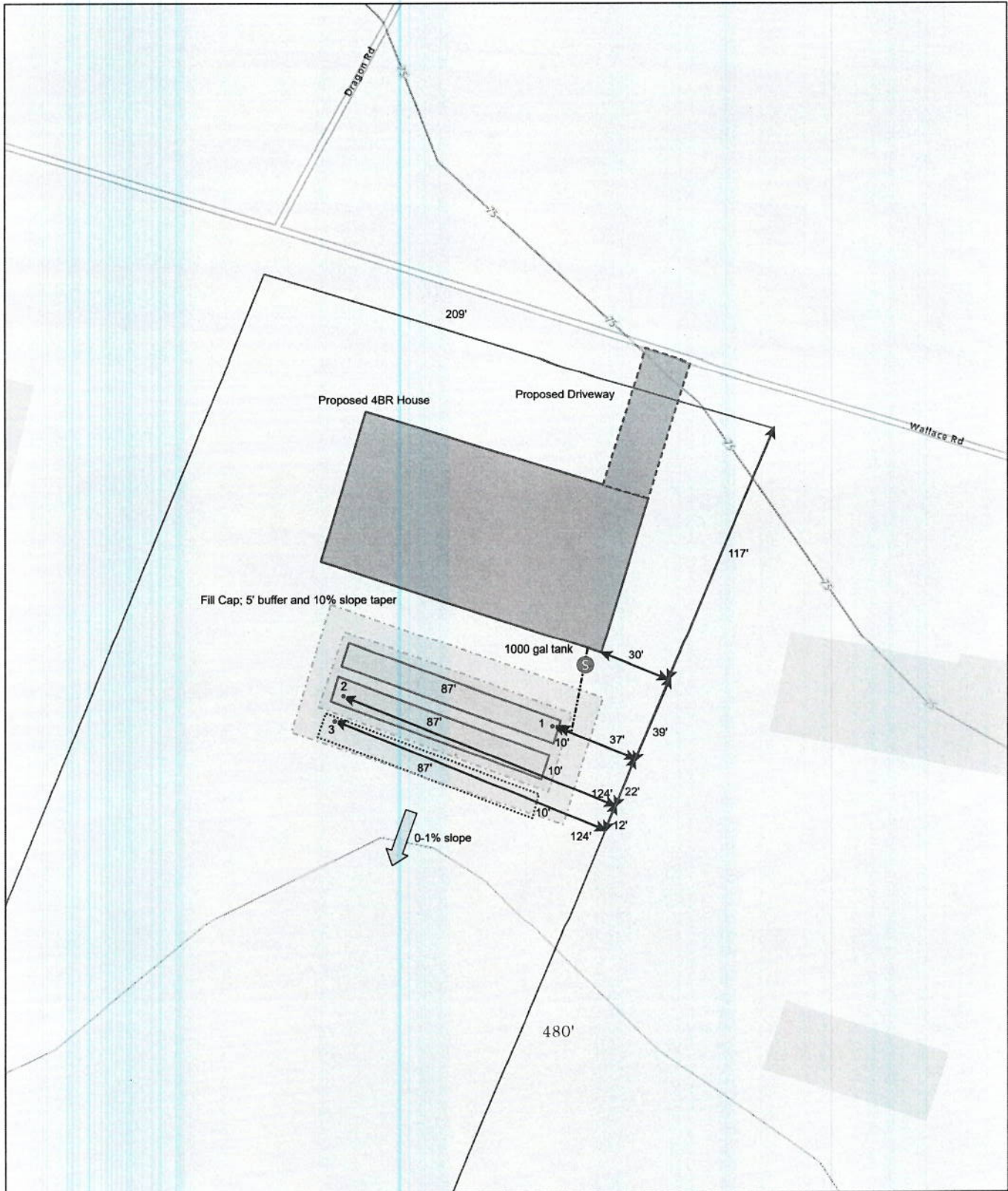
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- All applicable setbacks set forth in Regulation 61-56 apply.
- Do not install under wet conditions.
- Do not cut, fill, bulldoze, scrape or change the grade of the natural soils in the septic system area.
- Minimum 12" cover over system before approval -5' buffers & 10' 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.
- 75' setback from all private wells. 100' setback from public wells.
- Permit issued based on soil work and system recommendations from Tyler Sgro, PSC #119.

Issued/Revised By: _____

Date: _____

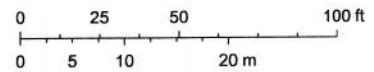
Phillips - Wallace Rd



8/29/2022, 10:43:46 AM

- Soil Data Form
- Project_Area_4301
- Septic_Design_8153
- Septic Tank
- Septic_Design_804
- ↔ Distance/Setback
- Distribution Line
- Septic_Design_9782
- House
- ▨ Driveway
- Drain Lines
- ⋯ Repair Lines
- ▨ Fill Cap
- Normal Intermediate Contours
- Normal Index Contours

1:564



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Created By: Davis Horizons

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APPROVAL TO OPERATE

Department Staff Inspection - Onsite Wastewater System

File Nbr: **2022080011**
County: **Williamsburg**

Name: TYLER SGRO	Address:	Program Code: 362
Type Facility: MOBILE HOME	4524 ORR ST	System Code:
Subdivision	NORTH CHARLESTON, SC 29405	TM No. 45-111-109
Block:	Site: WALLACE RD	Water Supply: PRIVATE
Lot:	LANE, SC	

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.