IMPROVEMENT PERMIT

Beaufort County Health Department
Environmental Health Section
220 North Market St.
Washington, NC 27889
Phone: (252) 946-6048

File/Permit Number: 483132 - 1
PIN/Lot Identifier: 5673-44-3107
Evaluated For: NEW
Permit valid until: 11/18/2031

Applicant: Don & Pam Hill
Owner: Don & Pam Hill **Owner's Phone Number:** (252) 943-1299
Property Location: Warren Chapel Rd Chocowinity, NC 27817
Road#: 1139

Subdivision (if applicable):
Lot Size: 5.17 **Lot #:** **Block:** 1139 **Section:**

Facility Type: SINGLE FAMILY **Number of bedrooms:** 3
Proposed Designed Daily Flow(GPD): 360 **Number of Occupants:** 6
Type of Water Supply: PUBLIC **Other:**

System Specifications Initial

Proposed Wastewater System Type*: LOW PROFILE
**Please include system classification for proposed wastewater system types in accordance with Rule .1301 Table XXXII*

Proposed LTAR: 0.3 **Saprolite System:** No **Septic Tank (gallons):** 1000
Usable depth to Limiting Condition (inches): 22 **Min. Trench Depth (inches)*:** 8
Fill Depth: 6 **Max. Trench Depth (inches)*:** 8
Pump required: May be required **Pump Tank(Gallons):** 1000
** Measured on the downhill side of the trench*

System Specifications Repair

Repair System Required? Yes

Proposed Wastewater System Type*: LOW PROFILE
**Please include system classification for proposed wastewater system types in accordance with Rule .1301 Table XXXII*

Proposed LTAR: 0.3 **Saprolite System:** No
Usable depth to Limiting Condition (inches): 22 **Min. Trench Depth (inches)*:** 8
Fill Depth: 6 **Max. Trench Depth (inches)*:** 8
Pump required: May be required
** Measured on the downhill side of the trench*

Artificial Drainage Required: No **If yes, please specify details:**
Drainfield location meets requirements of Rule .0508: Yes **Drainfield location meets requirements of Rule .0601:** Yes

Permit Conditions:

Site Modifications: The following must be completed before obtaining a Construction Authorization. 1) Locate and mark property corners 2) Provide BCHD with a final detailed site plan. 3) Stake house corners in the field.

Permit Conditions: 1000 gal septic tank, d-box, all piping and 4 (3'x100') low profile drainlines for initial septic system. Soil cloth required for drainlines. 6" of topsoil required for cover.

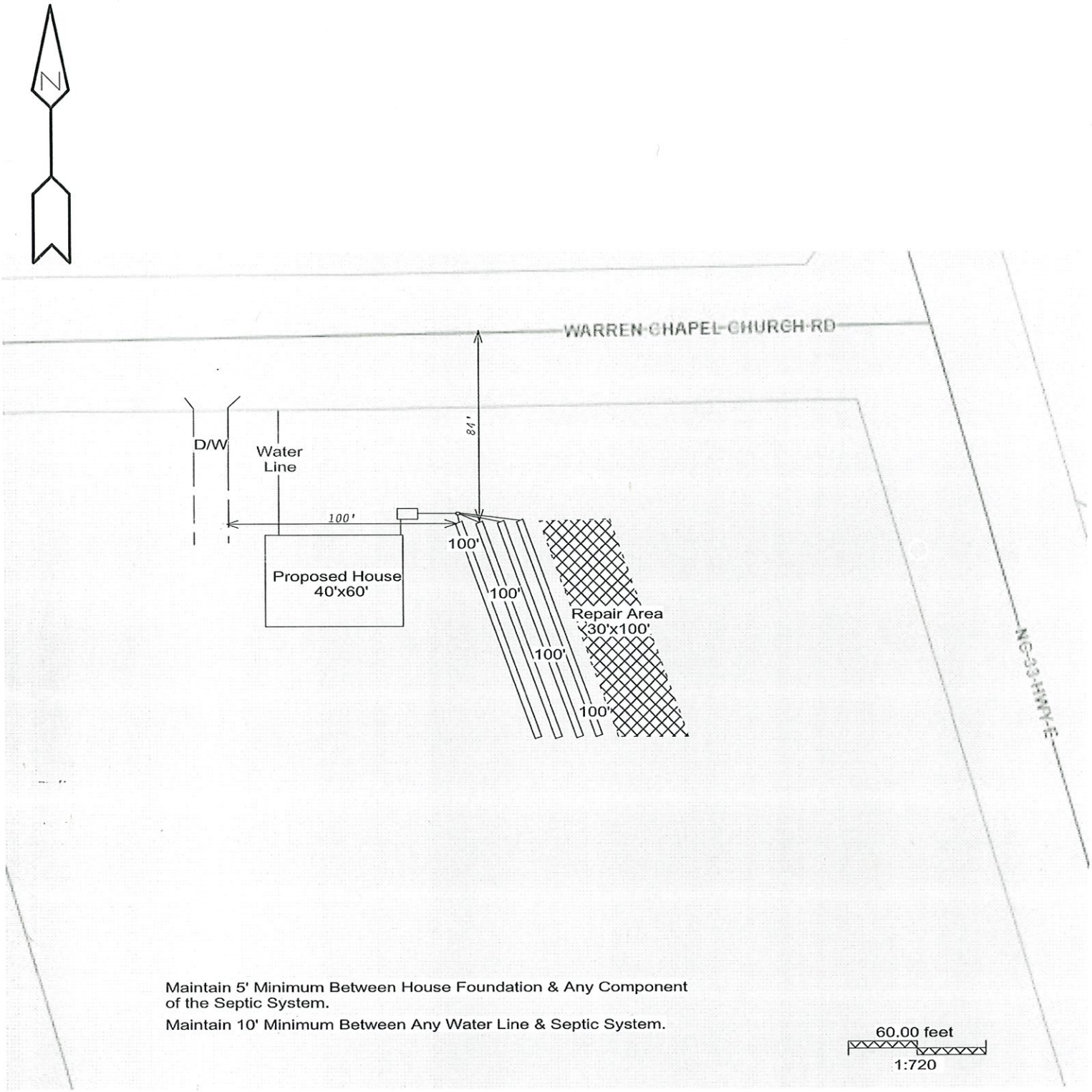
Authorized Agent's Printed Name: Stone, Cody Issue Date: 11/18/2026

Authorized Agent's Signature: Cody Stone Date: 11/18/2026

See attached drawing

The issuance of this permit in no way guarantees the issuance of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. The Department and Local Health Department may impose conditions on the issuance and may revoke the permits for failure of the system to satisfy the conditions, the rules, or this article. This permit is subject to revocation if the site plan, plat, or intended use changes (NCGS 130A-335(f)). The person owning or controlling the system shall be responsible for assuring compliance with the laws, rules, and permit conditions regarding system location, installation, operation, maintenance, monitoring, reporting, and repair (per rule .0301(a)).

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