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# JOHNSTON COUNTY ENVIRONMENTAL HEALTH DEPARTMENT

309 East Market Street  
Smithfield, North Carolina 27577  
Telephone: (919)989-5180 · Fax: (919) 989-5190  
www.johnstonnc.com/envhealth2

**Application #** 185651 **Parcel #** 03Q05038E

**Name:** MIDLAND INC **Address:** 427 EARNEST WAY Kenly, NC 27542

**Location:** I-95 N EXIT 106 T/R ON TRUCKSTOP RD TO PRINCETON-KENLY RD SUB DIV. ON RIGHT

**Subdivision:** GODFREY FARM **Lot #:** 24 **Lot Area:** 0.77 Acre(s) **Water Source:** Public

**Facility Type:** 3 Bedroom SFD (Max Occupancy 6) **Daily Flow For Design:** 120 gallons/bedroom **DDSF:** 360 gallons/day

**Service Type:** New Construction **Soil Site Classification:** Provisionally Suitable **LTAR:** 0.5 gallons/day/ft<sup>2</sup>

**Septic Tank:** 1000 gallons **Grease Trap:** N/A gallons **Pump Tank:** 1000 gallons

**Trench Type:** ACCEPTED **Trench Area:** 540 ft<sup>2</sup> **# of Lines:** 2

**Width:** 3 feet **Length:** 90 feet **Depth:** 18-20 inches

**Pump Size:** 12 ft TDH @ 20 gallons/minute **Pressure Head:** N/A **Drawdown:** 4 inches

**Design/Layout by:** N/A **Improvement Permit:** BEP **Date:** 8/2/22 **Exp. Date:** 8/2/27

**Inspection:** **Lines:** 2-90'-Poly Jts **Septic Tank:** MCP 1000 JTS **D-Box:** JTS

**Pump Tank:** MCP 1000 JTS **Pump(s) Pressure:** JTS **Alarm:** JTS

**Grease Trap:** Drainage: **Contractor:** Carroll Const. 919-285-6302

### AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION

ISSUED BY: Brynn Parker **DATE ISSUED:** August 2, 2022

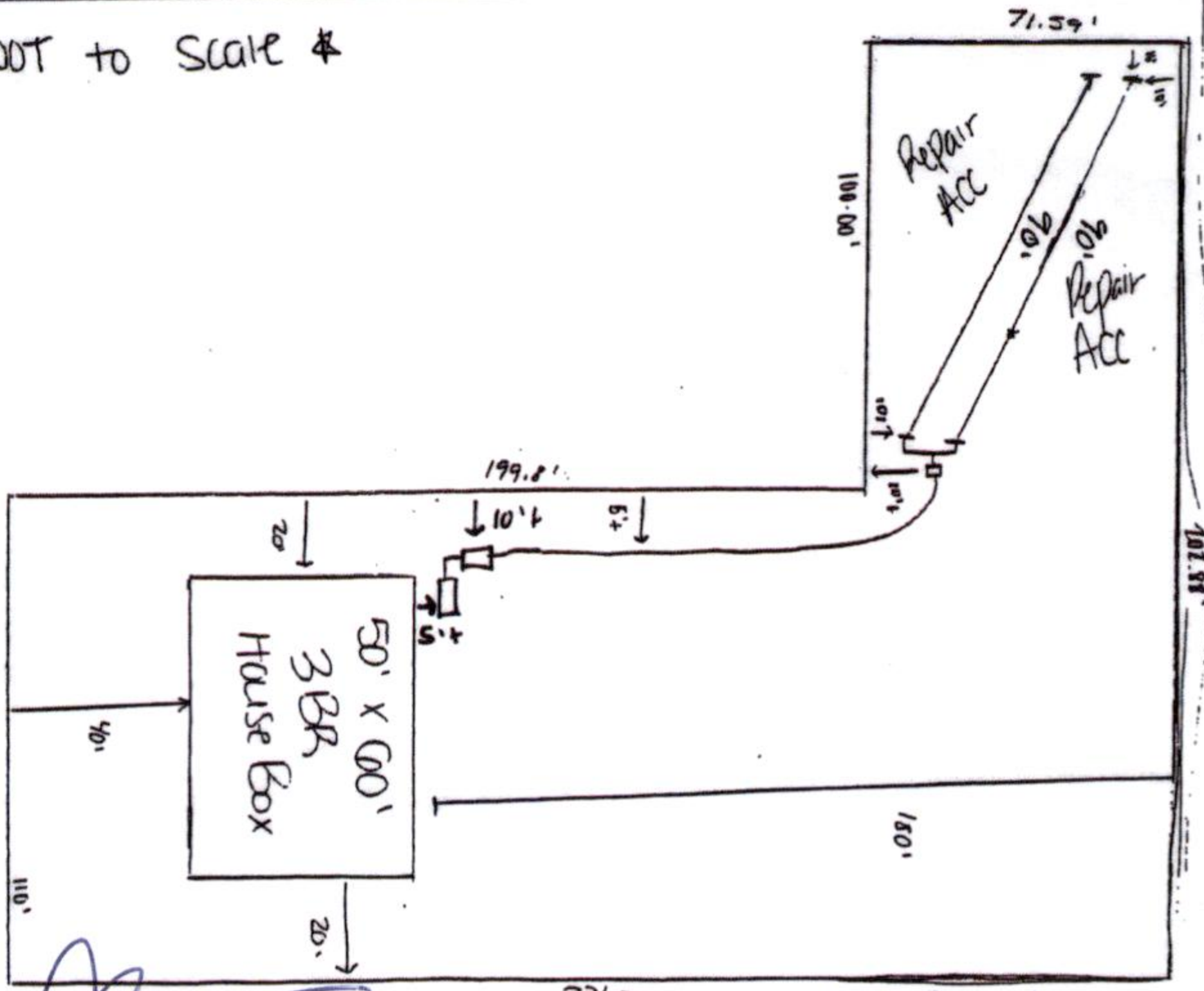
By rule, this septic system requires the use of an effluent filter and a waterproof seal. A riser and septic marker may also be required. Systems shall be installed as shown in sketch and/or according to attached plans and specifications. Any unauthorized site disturbance, filling, soil removal, or layout changes may result in the permit being revoked. Improvement permit is valid for 5 years from the date of issuance unless otherwise indicated. The owner/agent accepts & verifies the conditions of the permit as indicated below. Maintenance is required to ensure proper operation.

OWNER/AGENT: \_\_\_\_\_ DATE: \_\_\_\_\_

PLEASE CALL PRIOR TO OR DURING INSTALLATION WITH ANY QUESTIONS OR CONCERNS

- \*INSTALLER NOTE\***
- DO NOT cut, fill, or alter drainfield or repair area.
  - Comply with all setbacks
  - Divert all gutter drains away from septic areas
  - Do NOT install system under wet conditions

\* NOT to Scale \*



OPERATION PERMIT BY: [Signature] **DATE:** 12/13/24