

**SYSTEM TYPE III
 OPERATION PERMIT**

In accordance with the provisions of Article 11, Chapter 130-A of the General Statutes of North Carolina, an Operation Permit is issued on this date 24 October, 1997 to:

Owner Nora Dixon
 Mailing Address 2593 Lennoxville Road
 City, State Beaufort NC 28516
 Business Phone _____ Home Phone 728-3721
 Facility Location Atlantic Fisheries Lot 1 Block 1
2593 Lennoxville Road
 Facility Description 1000 gallon septic tank and 10'x30' Bed System

Design daily sewage flow 360 gpd based on three bedrooms
(beds, seats, people, etc.)

Engineer _____ Address _____

Contractor R.E. Willis Address _____
 Phone _____

Lessee or party responsible for operation, maintenance, and repair of this sewage system:
 Name Nora Dixon Address same as above
 Phone _____

- * It is the responsibility that all previous owners of this system assure the subsequent owners receive this permit and abide by all requirements and conditions.
- * If any ownership changes occur, then it is required for the new owner/operator to come into the Carteret County Health Department and update the permit information.

The routine maintenance requirements for this system are listed below:
Shape to shed surface water
Establish and maintain a vegetative cover.

Maintenance and cleaning records shall be kept by the system owner and shall be available for review by the Carteret County Health Department during inspections of the system.

At such time that any part of the sewage treatment and disposal system falls into disrepair or the system is causing a health hazard, the owner/operator shall notify the Carteret County Health Department within forty-eight (48) hours and shall take immediate corrective action in the repair of the system as directed by the department.

Other conditions or requirements See Permit.

Tri-Party Yes _____ No
 HOA formed Yes _____ No
 Easements deeded/recorded — Date _____

* Assure documents are copied and attached with this permit.
 This Operation Permit shall be attached to and shall be subject to all criteria, conditions, and provisions of Improvements Permit # R 1081
 dated 5 May 97.

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**SYSTEM TYPE III
OPERATION PERMIT**

*This Operation Permit shall be valid as long as the sanitary sewage system is in compliance with Article 11 of G.S. Chapter 130A, Laws and Rules for Sanitary Sewage Collection, Treatment, and Disposal (15 NCAC 18A .1900), and all conditions of this permit, including the items specified below:

1. The sewage collection, treatment, and disposal system shall be operated and maintained at all times to prevent public health hazards, to prevent seepage or discharge of sewage or effluent to the surface of the ground or surface waters, and to prevent the direct discharge of effluent to the ground water.
2. If a grease trap is installed, it shall be inspected a minimum of 2 to 4 week intervals and pumped as needed, with records of maintenance and cleaning kept by the owner. The grease trap will be required to be pumped and cleaned more frequently during peak season or periods of high use.
3. This permit does not constitute a warranty and does not negate or supersede any zoning restriction or restricted covenants in the chain of title. It is the responsibility of the permittee to determine whether or not such restrictions apply.
4. A complete set of operation and maintenance manuals and up-to-date approved as-built plans for all equipment installed shall be maintained at the site served by this facility. The manuals will include recommendations to guide the owner/operator.
5. Each septic tank shall be inspected for sludge and scum build-up annually. Tanks shall be pumped when the sludge level exceeds a third of the liquid depth. The septic tank will be required to be pumped and cleaned more frequently during peak season or periods of high use.
6. This permit is transferable and is valid only with respect to the facilities described herein and the specified design flow. Prior to any expansions or revisions, a revised permit shall be obtained from the Carteret County Health Department.
7. **Ground Absorption System Maintenance** - A suitable cover shall be maintained on the nitrification field (drain field). Grassed areas shall be kept mowed, and wooded areas kept free of undergrowth. Clippings and other landscape debris shall be removed from the disposal area. No traffic or other equipment shall be allowed on the disposal fields, with the exception of mowing equipment. Vegetative cover shall be inspected prior to each growing season and repairs or reseeding accomplished sufficiently to assure that soil erosion will not occur in the area.
8. All associated drainage (surface and subsurface) shall be maintained. The drainage outlet shall also be properly maintained.
9. Maintenance records be kept on all maintenance of the septic system which include:
 - a. Inspection of sludge and scum grease levels
 - b. Hauler, date pumped, and disposal site
 - c. Replacement of mechanical components
 - d. Records of landscape maintenance and drainage
 - e. All other pertinent maintenance
10. No parking, paving, driving or structure shall be allowed on the disposal field with the exception of mowing equipment or equipment used for repairs.

*If all conditions of this permit are not met, then this permit is void.

The Carteret County Health Department reserves the right to make inspections of these sewage collection, treatment, and disposal facilities as necessary to assure compliance with the provisions of this Operations Permit and the North Carolina Laws and Rules for Sanitary Sewage Collection, Treatment, and Disposal.

Operations Permit Issued 24 October 19 97
BY Robert J Mc Cabe, R.S.
Environmental Health Specialist

As the owner of the above sanitary sewage system, I agree to the conditions and requirements of this Operations Permit and will pass on to subsequent owners/operators.

Signed _____

mailed to PE Willis 10/20/97 RB

Dixon, Nera

ENVIRONMENTAL HEALTH DIVISION
CARTERET COUNTY HEALTH DEPARTMENT
BEAUFORT, NC 28516 (919) 728-8499

AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION

(NO CERTIFICATE OF OCCUPANCY SHALL BE ISSUED
UNTIL OPERATION PERMIT HAS BEEN ISSUED)

Page 1 of 2 I.P. R1081

G.S. 130a-336

VALID FOR FIVE (5) YEARS

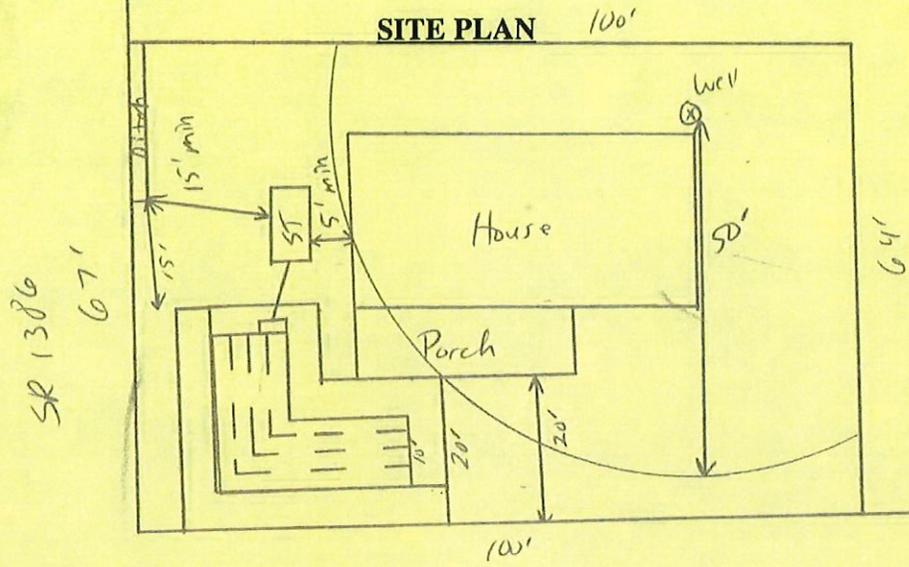
Subject to revocation if site plans or
if site is altered or intended use is changed.

DATE: 5 May 97 M.E. CLASSIFICATION III C

- NEW CONSTRUCTION
- REPAIR
- EXISTING SYSTEM

AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION BY:

Robert M. Cole, P.S.
ENVIRONMENTAL HEALTH SPECIALIST



This replaces site plan date 5/5/97.

Lennoxville Road

ELECTRICAL PERMIT REQUIRED: YES () NO ()
 OWNER: Nora Dixon
 ADDRESS: 2593 Lennoxville Road
Beaufort NC 28516 PHONE 728-3721
 TAX PARCEL: 11-19C-2-1
 PROPERTY LOCATION: Corner of Lennoxville Road and SR 1386
 SUBDIVISION: Atlantic Fisheries
 LOT: 1 BLOCK: 1 SEC: _____
 TYPE STRUCTURE: House
 NO. BEDROOMS: 3 NO. BATHS: 2 1/2
 NO. PEOPLE: ≤ 6 DESIGN FLOW: 360
 GARBAGE GRINDER: YES () NO ()
 SEPTIC TANK: 1060 GAL. PUMP TANK: N/A GAL.
 NO. LINES: 3 WIDTH: 10'
 TOTAL LENGTH: 30' FT. TOTAL 300 SQ. FT.
 WATER SOURCE: Well
 HORIZONTAL DISTANCE FROM WELL: 50+ FT.
 SITE MODIFIED: YES () NO ()
 DRAINAGE REQUIREMENTS: _____

***SYSTEM SHALL NOT BE INSTALLED UNDER WET CONDITIONS**
 *Trench bottom depth to be no deeper than 12" below fill naturally occurring surface.

Easement Required: _____ Yes No
 Drainage Maintenance Req. Surface () Subsurface ()
 Maintain Minimum 10' From Water Line
 Comments: Need to dig out top 12 inches of unsuitable fill and back fill with sand Pump, crush and fill old tank.

- * Prior to any changes in system layout, approval must be obtained from Health Department.
- * NOTICE: Construction must comply with all state and local regulations. Do not install well until well site has been approved on inspection.
- * NOTICE: Beware much property in Carteret County is subject to Wetland Regulations and properties containing wetlands should receive approval from U.S. Army Corp. of Engineers prior to development.

- STRUCTURE SHALL BE PLACED SO THAT GRAVITY FLOW IS ACHIEVED OR PUMP SYSTEM SHALL BE REQUIRED.
- DO NOT PARK, PAVE, DRIVE, OR BUILD OVER ANY PART OF SEPTIC SYSTEM OR REPAIR AREA.
- MAINTAIN A MINIMUM 5 FEET BETWEEN ANY FOUNDATION AND ANY PART OF SEPTIC SYSTEM OR REPAIR AREA.

FOR SYSTEMS REQUIRING LESS THAN 18" TRENCH BOTTOMS, A MINIMUM OF 6" SOIL COVER IS REQUIRED AND MAY REQUIRE ADDITIONAL FILL OF AT LEAST GROUP II SANDY LOAM TEXTURE.

(OFFICE USE FOR FIELD NOTES ONLY)
 MODIFICATION INSPECTION BY: _____ ENVIRONMENTAL HEALTH SPECIALIST

DATE: _____
 INSTALLER: _____
 COMMENTS: _____

SITE MODIFICATION REQUIREMENTS

I.P. R 1081
PAGE 1 OF 2
DATE: 5 May 97

GRADING MODIFICATION

House placement shall allow for gravity flow to septic system or pump system shall be required

GRADE AREA: _____

COMMENTS: _____

LPP SPECIFICATIONS

SEPTIC TANK: _____

PUMP TANK: _____

DRAINFIELD: _____

LTAR: _____

Plans for the LPP system shall be prepared by a person having a demonstrated knowledge of LPP's, such as an engineer licensed with the State of North Carolina.

The system shall be designed according to Section 1900 of the State Sewage Rules.

LPP plans shall be submitted to and approved by the Carteret County Environmental Health Division. Other requirements such as fill and/or grading may also be necessary.

A contract between the owner and a certified operator shall be required for the purposes of maintenance and operation of the above septic system.

COMMENTS: _____

*Prior to any changes in system layout, approval must be obtained from Health Department.

*NOTICE: Construction must comply with all state and local regulations. Do not install well until well site has been approved.

*NOTICE: Beware much property in Carteret County is subject to Wetland Regulations and properties containing wetlands should receive approval from U.S. Army Corp of Engineers prior to development.

WHEN THIS MODIFICATION HAS BEEN COMPLETED PLEASE NOTIFY THIS OFFICE AND ANOTHER INSPECTION WILL BE MADE. IF IMPROVEMENTS ARE SATISFACTORY, AN AUTHORIZATION TO CONSTRUCT CAN BE ISSUED.

(OFFICE USE FOR FIELD NOTES ONLY)

MODIFICATION INSPECTION BY: _____

ENVIRONMENTAL HEALTH SPECIALIST

DATE: _____

INSTALLER: _____

COMMENTS: _____

DRAINAGE MODIFICATION

COMMENTS: _____

FILL MODIFICATION

AMOUNT OF SAND 18"

6" TOPSOIL AFTER SYSTEM INSTALLED

FILL AREA 20' X 40'

STANDARD PROCEDURES:

1. Fill material shall be applied in three stages:
 - a. The fill area should be cleared of any vegetative cover or organic litter and disked to a depth of six inches.
 - b. Two to three inches of Group I Sand is placed in fill area and disked or mixed in with the original soil to a depth of six inches.
 - c. When b. is completed, the remainder of the Group I Sand can be added to the specified area and then inspected by this office. **FILL MATERIAL SHALL NOT CONTAIN CONSTRUCTION DEBRIS, TRASH, ROCK CLAY BALLS, HARD PAN MATERIAL OR ANY OTHER THAN SAND.**
2. Topsoil installation:
 - a. After the system is installed according to the IMPROVEMENT PERMIT and inspected by this office, the topsoil can be installed.
 - b. The topsoil will be Group II Sandy Loam or Loam. The topsoil shall be limed and/or fertilized if necessary to promote vigorous growth of grass.
 - c. The entire filled area shall be seeded with perennial grass seed.

LEGEND

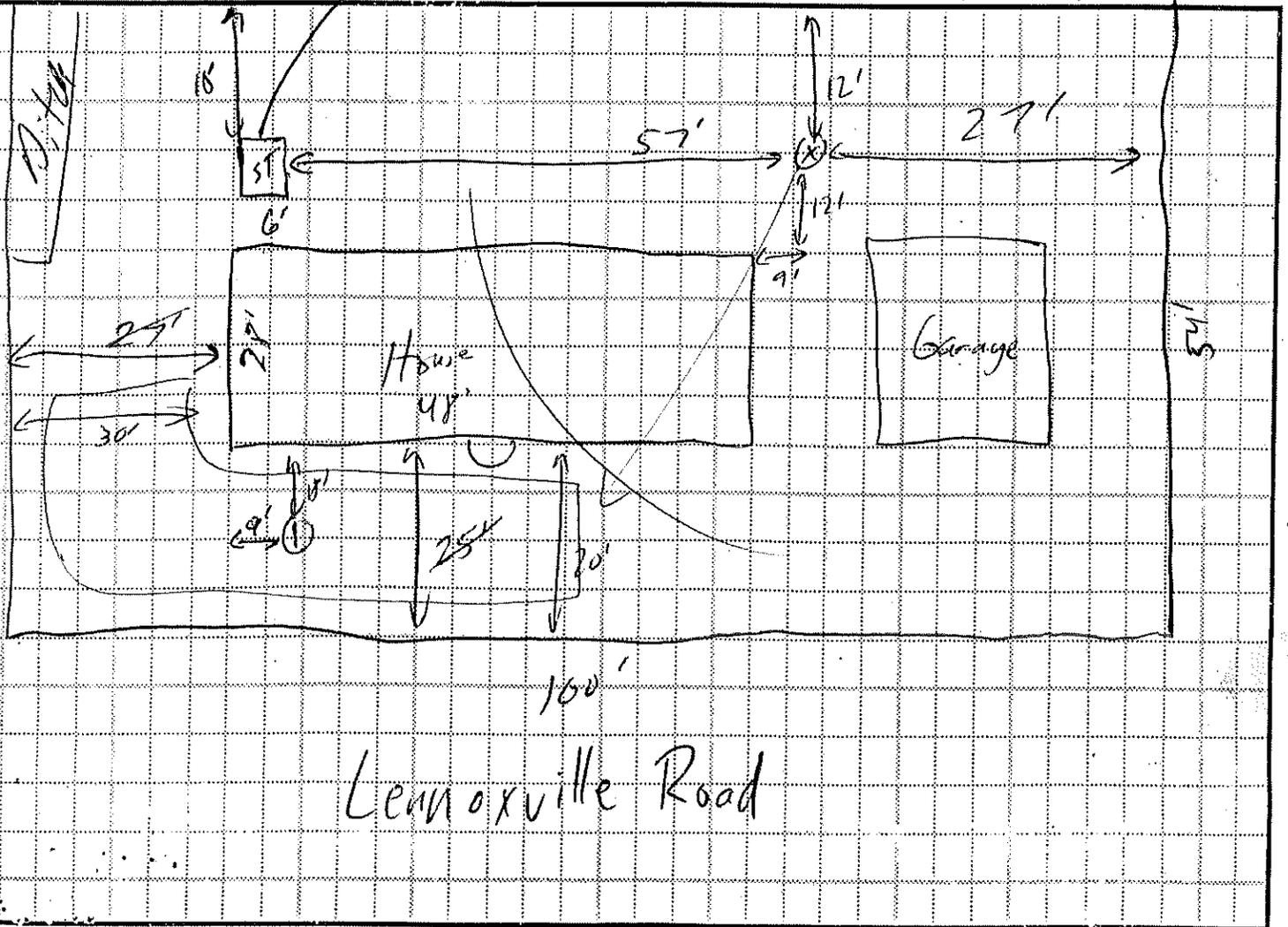
use the following standard abbreviations

LANDSCAPE POSITION	GROUP	SOIL TEXTURE	CONVENTIONAL 1955 LTAR	LPP 1957 LTAR	MINERALOGY/ CONSISTENCE	STRUCTURE
CC (Concave Slope)	I	S (Sand)	1.2 - 0.8	0.6 - 0.4	NEXP (Non-expansive) SEXP (Slightly Expansive) EXP (Expansive)	G (Single Grain)
CV (Convex Slope)		LS (Loamy Sand)				M (Massive)
D (Drainage Way)	II	SL (Sandy Loam)	0.8 - 0.6	0.4 - 0.3		CR (Crumb)
DS (Debris Slump)		L (Loam)				GR (Granular)
FP (Flood Plain)						SBK (Subangular Blocky)
FS (Foot Slope)	III	SI (Silt)	0.6 - 0.3	0.3 - 0.15		ABK (Angular Blocky)
H (Head Slope)		SICL (Silty Clay Loam)				PL (Platy)
L (Linear Slope)		CL (Clay Loam)				PR (Prismatic)
N (Nose Slope)		SCL (Sandy Clay Loam)				
R (Ridge)		SIL (Silt Loam)				
S (Shoulder Slope)	IV	SC (Sandy Clay)	0.4 - 0.1	0.2 - 0.05	MOIST VFR (Very Friable) FR (Friable) FI (Firm) VFI (Very Firm v. Very Sticky) EFI (Extremely Firm)	WET NS (Non-sticky) SS (Slightly Sticky) S (Sticky) VS (Very Sticky) NP (Non-plastic) SP (Slightly Plastic) P (Plastic) VP (Very Plastic)
T (Terrace)		SIC (Silty Clay)				
		C (CLAY)				
		O (Organic)				None

NOTES

- HORIZON DEPTH** In inches below natural soil surface
 - DEPTH OF FILL** In inches from land surface
 - RESTRICTIVE HORIZON** Thickness and depth from land surface
 - APROLITE** S(suitable) or U(unsuitable)
 - WETNESS** Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - record Munsell color chip designation
 - CLASSIFICATION** S (Suitable), PS (Provisionally Suitable), or U (Unsuitable)
- Evaluation of saprolite shall be by pits.
 Long-term Acceptance Rate (LTAR): gal/day/ft²

Show profile locations and other site features (dimensions, reference or benchmark, and North).



Fire Damage - ~~OK~~ ~~held~~ ~~Call~~ ~~when~~ ~~Staked~~ 728-3721

NEW CONSTRUCTION ()
EXISTING ()
REPAIR ()

APPLICATION FOR IMPROVEMENTS PERMIT

AREA 3 PRIORITY 1

ENVIRONMENTAL HEALTH DIVISION
CARTERET COUNTY HEALTH DEPARTMENT 5/1/97
BEAUFORT, NC 28516

APP. ON HOLD
STAKED/ACCESSIBLE
PD APPROVAL

DATE: 4/30/97 RB
PHONE: 728-3721

OWNER NORA DIXON

ADDRESS 2593 Kennoxville Rd Beaufort N.C. 28516

APPLICANT/AGENT _____ PHONE: _____

ADDRESS _____

SUBDIVISION Atlantic Fisheries LOT 1 BLOCK 1 SECTION _____

PROPERTY LOCATION Same

TYPE STRUCTURE Single fam. House CONCRETE FLOOR _____ (YES) X (NO)

NO. BEDROOMS 3 NO. BATHS 2 1/2 NO. PEOPLE 2 GARBAGE GRINDER: _____ (YES) X (NO)

WATER SOURCE Well FLOOD ZONE _____ ELEVATION _____

PIN # 731500475609 11-19C-2-1 .15563

* ACTION ON THIS APPLICATION WILL NOT BE TAKEN UNTIL THIS OFFICE HAS BEEN ADVISED THAT THE HOUSE AND PROPERTY LINES ARE STAKED AND THE LOT ACCESSIBLE FOR EVALUATION.

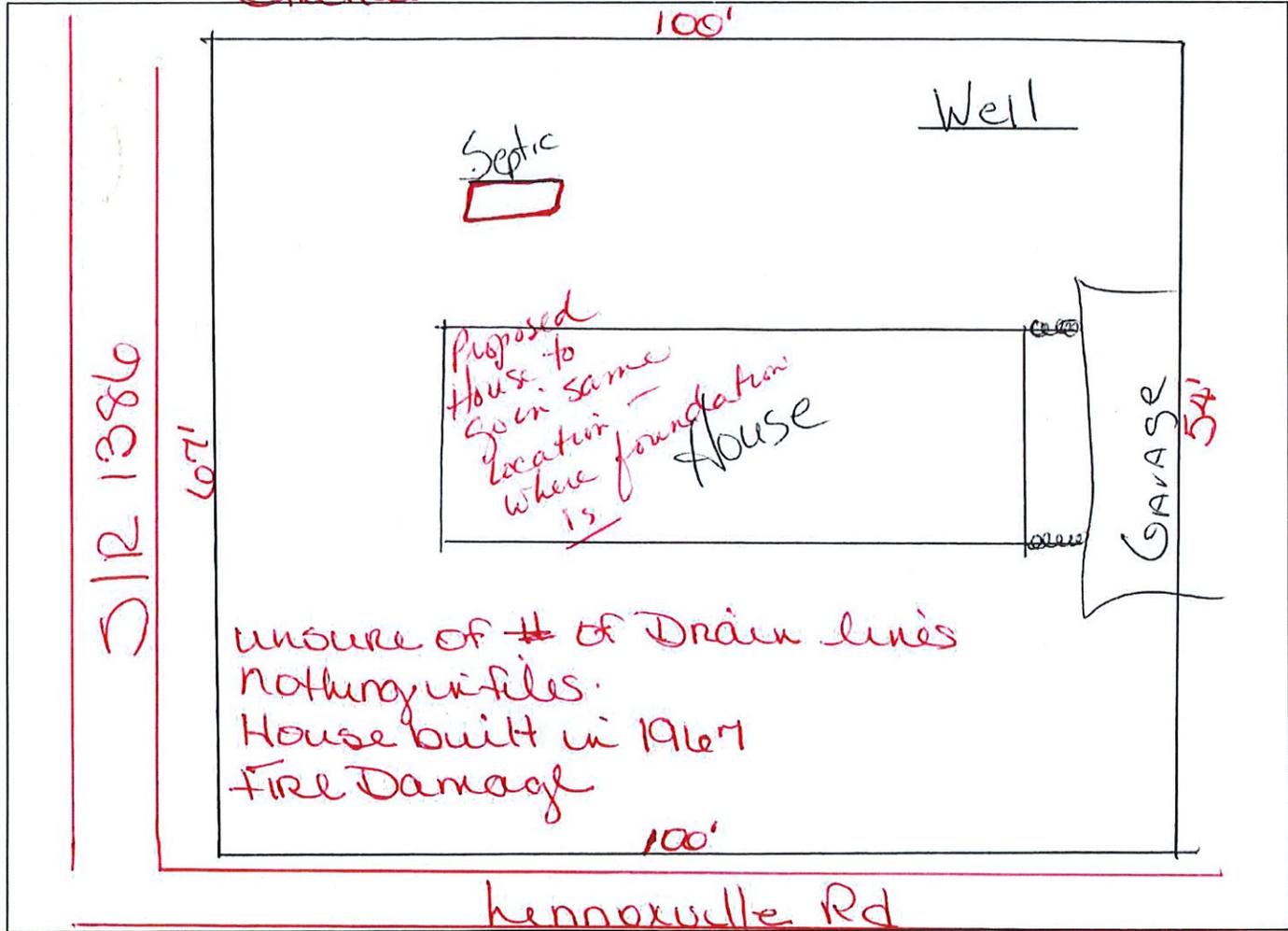
** NOTE: THIS PROPERTY MAY CONTAIN DESIGNATED WETLANDS. APPROVAL FROM U. S. ARMY CORPS OF ENGINEERS MAY BE REQUIRED PRIOR TO DEVELOPMENT. ADDITIONALLY, CAMA PERMIT SHALL BE REQUIRED IF ANY PART OF THIS STRUCTURE, SEPTIC TANK OR POTABLE WATER SYSTEM IS TO BE WITHIN 75' OF SHORELINE, CANALS OR OTHER WATERS OR MARSH.

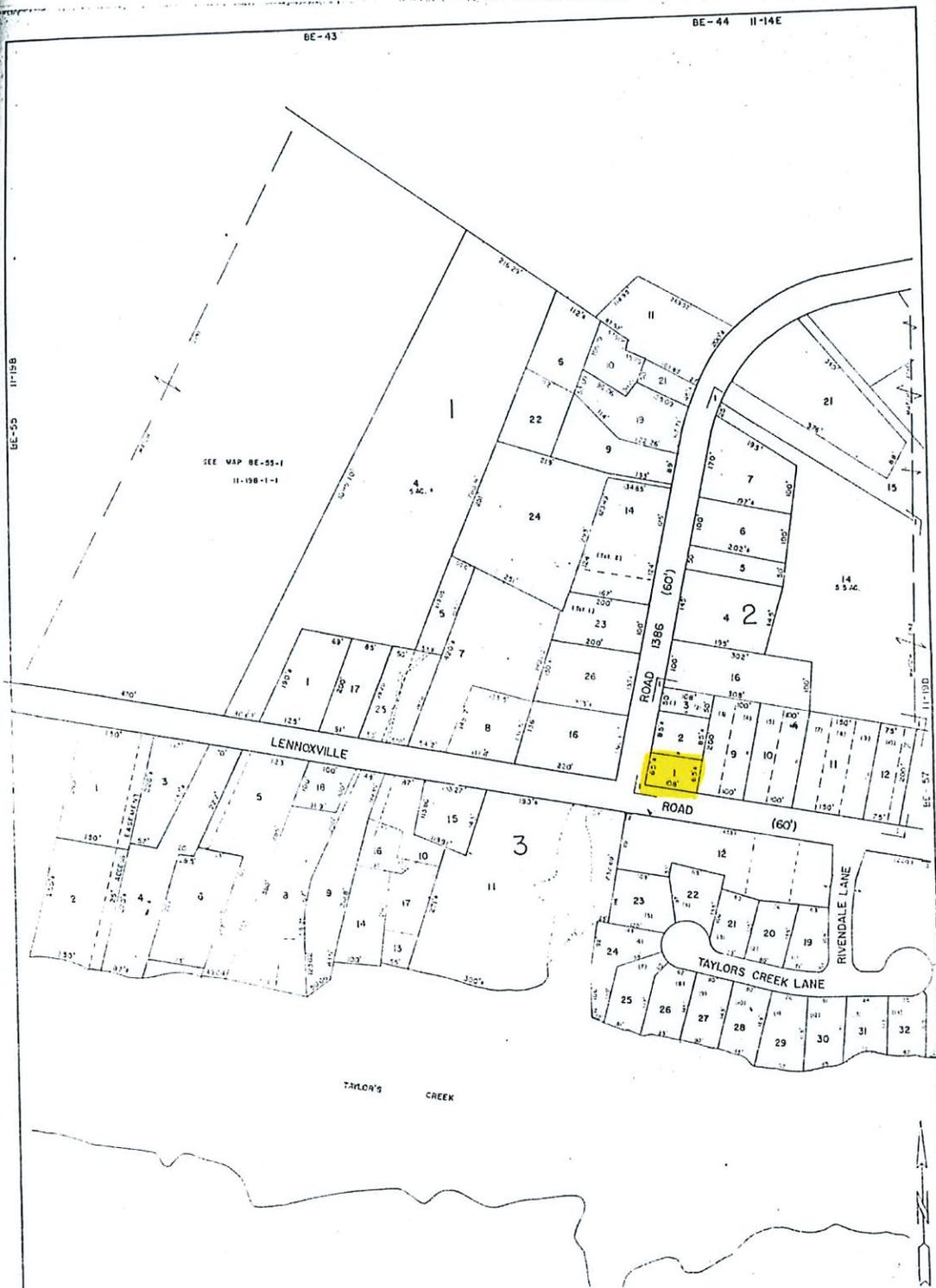
*** IMPROVEMENT PERMITS HAVE NO EXPIRATION DATE. AUTHORIZATION TO CONSTRUCT VALID FOR 5 YEARS FROM DATE OF ISSUANCE.

*** IMPROVEMENT PERMIT SUBJECT TO REVOCATION IF SITE PLANS OR INTENDED USE CHANGES.

BROCHURE RECEIVED ADD Initial

SIGNATURE Nora Dixon





TAYLOR'S CREEK S/D P23 288
 (1) ATLANTIC FISHERIES TCT.

CLT
BALANCED
GOVERNMENTAL
SERVICES ATA
 Tax Mapping Division

LEGEND

--- PLAT BOUNDARY LINE
 --- PLAT MAP LINE
 --- PLAT LOT LINE
 --- PLAT LOT LINE & NO.
 --- PLAT LOT LINE & NO.
 --- PLAT LOT LINE & NO.

2

SOLE LAYER TRUMBLE COMPANY
 1315 SALEM AVENUE - SUITE 3002 ASHON
 2215 PINEWATER PARK
 ATLANTA, GA 30329

NOTE

THIS MAP WAS PREPARED BY THE SOLE LAYER TRUMBLE COMPANY AND IS SUBJECT TO THE TERMS AND CONDITIONS OF THE CONTRACT UNDER WHICH IT WAS PREPARED.

COMPILED BY	DATE
DRAWN BY	DATE
CHECKED BY	DATE
APPROVED BY	DATE

CARTERET CO. NC

MAP NO.
11-19C

SCALE: 1" = 100'
BE-56

731506475609