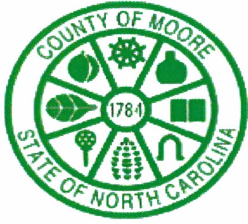


Permit # 48985 LRK# 26804
00026806
Property Address: 117 BANBRIDGE DR, SEVEN LAKES WEST

Page 1 of 2
Number of Bedrooms: 4



Moore County Health Department

Environmental Health Section

P.O. Box 279, Carthage, NC 28327

Phone: 910-947-6283 Fax: 910-947-5127

Operation Permit

Owner: ABCZ PROPERTIES Phone # _____
Installer: DON GADDY Phone # _____
Address: _____
System Type: GRAVITY QUICK 4- TYPE IIb Maximum Design Flow: 480
Wastewater Characteristics:
Septic Tank Capacity: GTS-1000 Date: _____ Tank ID# STB-2157
Pump Tank Capacity: N/A Date: _____ Tank ID# _____
Nitrification Lines Dimensions: A. 46'- B.-F.- 5@ 34'- G. 26'- 242 TOTAL
Effluent Distribution Device: _____ Serial _____ Media Depth: 12
Depth To: _____ Top of Tanks: 3-4 INCHES Trench Bottom: 16
Scale: NTS Inch = _____ Feet

SEE LAYOUT

Issued By: Nathan Hanson Date: 2/25/2025

The requirements of 15A NCAC 18E are incorporated by reference into this permit and shall be met. This Operation Permit is subject to compliance with the provisions of 15A NCAC 18E, or 15A NCAC 18A .1900, as applicable, and to the conditions of this permit. Final approval of this system shall indicate that the system has been installed in accordance with applicable permit conditions, laws and rules, but in no way should be taken as a guarantee that the system will function satisfactorily for any given time.



