Project title

County

DEHNR-OSWS LARGE SUBSURFACE WASTEWATER SYSTEM REVIEW TRANSMITTAL CHECK-LIST

I. SYSTEM WASTEWATER DESIGN FLOW CONFIRMATION*

Done Applicable A. Application information Application for Improvement Permit has been submitted to LHD (four copies attached) (2a)** Π Property has been shown on plat or boundary survey, and PIN number and locator map have been provided Name, address, phone, Fax, E-Mail Numbers for owner, agent, engineer, soils consultant are attached Project proposed is described, including whether new, repair, expansion, replacement, modification of existing, or combination Water supplies (existing and proposed) and surface waters have been described and locations shown Π Facilities are described and located (existing and proposed) which are to be served by proposed system, including occupancy and projected use patterns Π List provided of all wastewater sources and water use fixtures (points of wastewater entry into system) Projected wastewater characteristics (e.g. including wastewater quality data for any nondomestic sources) and flow patterns are described Wastewater system components are described and located (existing and proposed) Proposed phasing schedule for facilities and system components is provided. Π Documentation provided to LHD indicating wastewater system and facility are under ownership or control of person owning the facility or that an owners association and triparty agreement shall be provided B. Design Flow Information $(3)^{**}$ Proposed design flow attached for sizing each system component (e.g. pretreatment units, and drainfields) and phase of development Basis, including calculations, for determining design flows provided by Applicant's engineer Π If flow reduction proposed, the conditions of Rule .1949(c) have been met If reduction proposed is based on flow data: Comparable facility has been fully described, including comparative occupancy, hours of operation, location, size, floor plans, water use fixtures and water use practices. For food service facility, documentation on comparable dining area size and use of multi- vs. single-service utensils and plates have been provided.

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| | Flow meter(s) location(s) has been specified and measurement units have been field confirmed, with documentation attached. |
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| | Flow data provided include at least 12 previous consecutive monthly consumption readings and 30 days of consecutive daily flow readings from an average or above average month. |
| | Occupancy data has also been collected at least during this 30 day period. |
| | If wastewater includes food service or other non-domestic sources, at least two effluent samples during hours of operation have been taken from a comparable facility. For food service, samples have been analyzed for BOD or COD, total suspended solids and grease + oil. |
| | Pretreatment measures have been proposed to off-set any high strength characteristics of the wastewater from the proposed facility (description attached). If reduction proposed is based on using water-conserving fixtures: |
| | Manufacturer's cut sheets are attached for proposed plumbing fixtures, including water consumption per use. |
| | Provisions are described for wastewater minimization and for diverting extraneous waters from the wastewater system (eg: cooling system condensate discharges) |
| | If reduction is based on flow equalization, anticipated flow pattern, basis for sizing dosing tank and drainfields, and method of equalizing flows are fully described. |
| C. | <u>Concurring Signature</u> , that the applicant has, to the best of his/her abilities and belief, provided complete and factual representations of the information requested above: |

Applicant or Applicant's Agent

D. <u>Health Department's Concurrence</u> that Application has been submitted, requested information appears complete and State review is requested:

Local Health Department Environmental Health Specialist

* Note to all interested persons. This transmittal check list and necessary accompanying information shall be submitted with a request for design flow confirmation to the On-Site Wastewater Section, Division of Environmental Health, 1642 Mail Service Center, Raleigh, NC-27699-1642 (Phone: 919-733-2895).

** Numbers in parentheses () refer to corresponding item in document entitled "Procedures and Information Required for Approval of Large Subsurface Wastewater Systems", which contains complete information on the large system review and approval process and may be obtained from the On-Site Wastewater Section

Date

Date