

#### **PERMIT TO CONSTRUCT**

Onsite Wastewater System

Site: Barry Murdaugh Type Facility: Residential

Subdivision:

Block: Lot: 5

Site Address: Moselle Rd

Islandton, SC, 29929

Program Code: ALTERNATIVE

County: Colleton

System Code: 220 SHALLOW PLACEMENT

Permit ID: OSWW038127 v1.0

6-IN STONE

TM #: 140-00-00-027.000 Water Supply: Private Well

PERMIT TO CONSTRUCT SYSTEM SPECIFICATIONS

LTAR (g/d/ft²): 0.7 Min Pump Capacity: GPM at ft. of Head

#### SPECIAL INSTRUCTIONS/CONDITIONS

THIS PERMIT IS SITE SPECIFIC. ANY CHANGES TO THE SYSTEM MUST BE APPROVED BY SCDES. ALTERNATIVE TRENCH PRODUCTS APPROVED UNDER STATE RULES AND REGULATIONS MAY BE SUBSTITUTED. ANY UNAPPROVED CHANGES WILL VOID THIS PERMIT.

Installers must contact the local SCDES office by 10:00 AM the day prior to installation in order to schedule a time for the final inspection. If a Department representative does not arrive within 30 minutes of the scheduled time, the installer may conduct the final inspection. When a contractor self-inspection occurs, the installer must complete SCDES form 3978, Approval to Operate Contractor Self-Inspection. The installer must submit the SCDES form 3978 within 2 business days of the completion of installation.

Self-installations require a pre-construction conference with a Department representative.

- 75' setback from all private wells. 100' setback from public wells.
- No parking, driving, building or paving over the area of septic system before or after installation.
- All applicable setbacks set forth in Regulation 61-56 apply.

JH00)

### PERMIT TO CONSTRUCT SYSTEM DIAGRAM

See System Diagram on page 2 of this document.

Issued/Revised By:

Date: October 08, 2025



### **PERMIT TO CONSTRUCT**

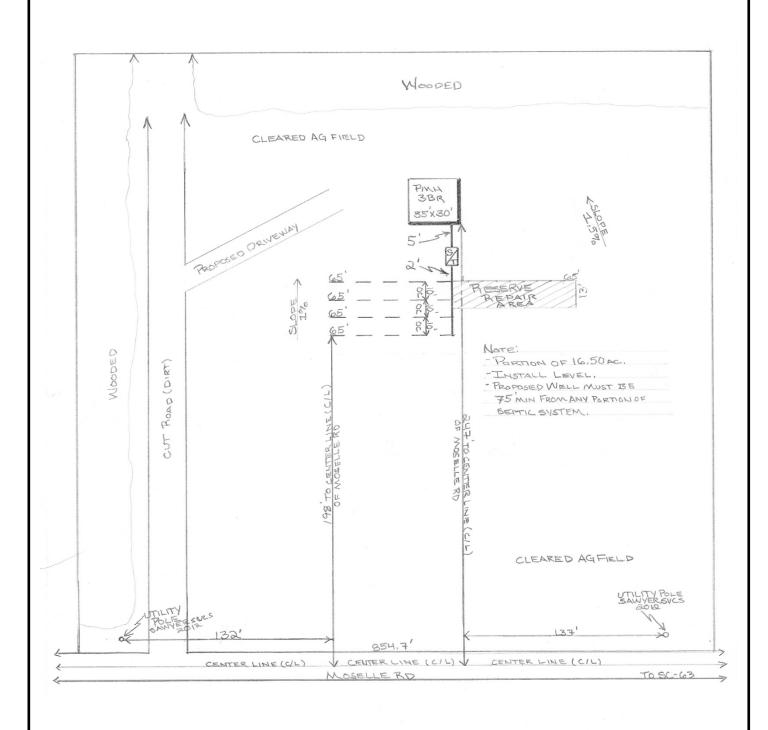
Onsite Wastewater System

Site: Barry Murdaugh

**Permit ID:** OSWW038127 v1.0

County: Colleton

PERMIT TO CONSTRUCT SYSTEM DIAGRAM





# **Final Inspection Onsite Wastewater System**

Permit ID: OSWW038127 v1.0 County: Colleton

Site: Barry Murdaugh **Type Facility:** Residential

**Subdivision:** 

Lot: 5

Gallons Per Day (GPD): 360

Site Address: Moselle Rd Islandton, SC, 29929

**Program Code:** Alternative

System Code: 220 TM #: 140-00-00-027.000 Water Supply: Private Well

(NTS) FINAL INSPECTION and ACTUAL INSTALLATION (Insert Drawing Below) Installer: Septic Tank Mfr. & Size: Pump Chbr Mfr. & Size: **Pump Mfr:** Pump Model: **Grease Trap Mfr:** Alt Product & Model: **Aggregate Type:** Agg Depth (in): Trench Width (in): Trench Depth (in): Fill Cap: □Yes □No Well Inst: □Yes □No Well Dist (ft): **Building Dist (ft):** Property Dist (ft): Water Dist (ft): **Elevation Readings:** Plumbing Stubout: Septic Tank Inlet: Septic Tank Outlet: Pump Chamber Inlet: **Grease Trap Readings:** Stubout: Inlet: Outlet: Septic Tank Inlet: **Trench Information:** Trench No.: Trench Length: Elevations: Inspected By: Dept. Staff **Comments:** Installer \_License #:\_\_ I hereby certify the system was installed in accordance with the referenced permit and R.61-56. Installer Signature: \_\_\_ THIS IS NOT AN APPROVAL TO OPERATE THIS FORM MUST BE COMPLETELY FILLED OUT AND SUBMITTED TO THE LOCAL SCDES REGIONAL OFFICE WITHIN 48 HOURS OF SYSTEM

INSTALLATION. THE SYSTEM CANNOT BE PLACED INTO OPERATION UNTIL AN OFFICIAL APPROVAL TO OPERATE IS ISSUED BY A DEPARTMENT REPRESENTATIVE.

# **Final Inspection**

## **Onsite Wastewater System**

Instructions for Completing SCDES 4432

**Purpose:** This form should be utilized to record final installation of septic systems.

**Audience:** This form should be utilized by SCDES staff or a licensed septic system installer who will be conducting final inspections on septic systems.

#### **Instructions:**

- 1. Form must be completed as indicated and submitted to the Department.
- 2. If being completed by a licensed septic system installer, it must be submitted to the Department within two (2) business days of completing the system installation.
- 3. The abbreviations contained within this document are as follows:
  - a. TM #: Tax Map Number
  - b. No.: Number
  - c. NTS: Not to Scale
  - d. Mfr: Manufacturer
  - e. Alt: Alternative
  - f. Agg: Aggregate
  - g. Inst: Installed
  - h. Chmbr: Chamber
  - i. Dist: Distance
  - j. in: Inches
  - k. ft: Feet

**Office Mechanics & Filing:** This form is maintained under Retention Schedule 07335, Onsite Wastewater System Application and Permit Records.