



BEST PROFESSIONAL JUDGMENT
for
WILKES COUNTY HEALTH DEPARTMENT
or
PRIVATE LICENSED PROFESSIONALS
IN ACCORDANCE WITH 15A NCAC 18E .1306



**This page to be completed by LHD or private licensed professional*

SITE LIMITATIONS – Check the specific rules that prevent the site from being repaired and permitted in accordance with G.S. 130A, Article 11 and 15A NCAC 18E.

- | | |
|---|--|
| <input type="checkbox"/> Rule .0502 – Topography & Landscape Position | <input type="checkbox"/> Rule .0506 – Saprolite |
| <input type="checkbox"/> Rule .0503 – Soil Morphology | <input type="checkbox"/> Rule .0507 – Restrictive Horizons |
| <input type="checkbox"/> Rule .0504 – Soil Wetness Condition | <input type="checkbox"/> Rule .0508 – Available Space |
| <input type="checkbox"/> Rule .0505 – Soil Depth | <input type="checkbox"/> Other Rule(s) (please specify): _____ |

PLEASE CHECK THE FOLLOWING WHEN COMPLETED:

(all boxes must be reviewed, and applicable boxes checked before issuance of repair permit)

- Wastewater system troubleshooting complete. Household/facility water use has been reviewed.
- Wastewater system repair does not reduce the required horizontal setbacks to drinking water wells as indicated in 15A NCAC 18E .0601.
- Wastewater system repair does not reduce the required horizontal setbacks to surface water bodies greater than 50 percent of the horizontal setbacks indicated in 15A NCAC 18E .0601.
- Wastewater system repair has a reasonable expectation to function in accordance with 15A NCAC 18E .1306(c)(2)(D).

REHS SIGNATURE (if applicable)

Signature of Authorized Agent **Date**

OR

AOWE/PE SIGNATURE (if applicable)

Signature of AOWE/PE **License Number** **Date**

**This written agreement shall be attached to the Construction Authorization, Operation Permit, Notice of Intent to Construct, or Authorization to Operate, as applicable.*

