Harnett County Environmental Health

File/Permit Number: BCOn 2404-0007 IMPROVEMENT PERMIT PIN/Lot Identifier: Section: Subdivision (if applicable) Expansion \square Change of Use New 📝 System Relocation Design Wastewater Strength: Domestic Industrial Process Wastewater High Strength Proposed Design Daily Flow: 2/25 Proposed LTAR (Initial): Proposed LTAR (Repair): (Initial) Pump Required: Yes No May be required (Repair) Pump Required: Yes No May be required *Please include system classification for proposed wastewater system types in accordance with Rule .1301 Table XXXII Effluent Standard: DSE HSE NSF/ANSI 40 TS-I TS-II RCW Saprolite System (Initial): Yes No Saprolite System (Repair): Yes No Fill System (Initial): Yes No If yes, specify: New Existing (when adding more than 6 inches of fill to system area provide a fill plan) Fill System (Repair): Yes No If yes, specify: New Existing (when adding more than 6 inches of fill to system area provide a fill plan) Usable Depth to LC (Repair)x: Usable Depth to LC (Initial)x: Max. Trench Depth (Repair)*: 24 * Measured on the downhill side of the trench Artificial Drainage Required: Yes No If yes, please specify details: Type of Water Supply: Private well Public well Shared well Municipal Supply Drainfield location meets requirements of Rule .0508: Yes No Drainfield location meets requirements of Rule .0601: Yes No Drainfield location meets require Permit valid for: Five years [site plan submitted pursuant to GS 130A-334(13a)] No expiration [plat submitted pursuant to GS 130A-334(7a)] Permit conditions: Authorized Agent's Printed Name:

The issuance of this permit in no way guarantees the issuance of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. <u>This permit is subject to revocation if the site plan, plat, or the intended use changes.</u> The Improvement Permit shall not be affected by a change in ownership of the site. This permit is subject to compliance with the provisions of 15A NCAC 18E and to the conditions of this permit.

See attached site sketch

Harnett County Environmental Health

File/Permit Number: BODM 2404-8007

CONSTRUCTION AUTHORIZATION

County: Harnett PIN/Lot Identifier:
Owner: DUKB Grenzy Applicant: / yer Cole
Property Location: 1325 Brokens RS Draw N.C. 20234
Facility Type: DUKE Breney Warehous
Number of bedrooms: 3 Number of Occupants: Other:
New Expansion Repair System Relocation Change of Use
Basement? Yes No Basement Fixtures? Yes No
Crawl Space? Yes No Slab Foundation? Yes No
Type of Wastewater System* Covered (Initial) Converting (Repair)
*Please include system classification for proposed wastewater system types in accordance with Rule .1301 Table XXXII
Design Daily Flow: 2775 GPD Wastewater Strength: Domestic High Strength Industrial Process Wastewater
Rule .0403(e) Engineering Design Utilizing Low-flow Fixtures and Low-flow Technologies (S.L. 2013-413 and 2014-120)? Yes (if yes, please provide engineering documentation)
Effluent Standard: DSE HSE NSF/ANSI 40 TS-I TS-II RCW
Type of Water Supply: Private well Public well Shared well Municipal Supply Spring Other:
Installation Requirements/Conditions
Septic Tank Size: gallons Total Trench/Bed Length: feet Trench/Bed Spacing: feet on center
Trench/Bed Width: inches LTAR: gpd/ft² Usable Depth to LC (Initial) ^x : ^x Limiting condition
Soil Cover: inches Slope Corrected Maximum Trench/Bed Depth [‡] : inches * Measured on the downhill side of the trench
Pump Tank Size (if applicable): gallons Requires more than one pump? \[\subseteq Yes \] No
Pump Requirements: ft. TDH vs GPM Grease Trap Size (if applicable): gallons
Distribution Method: Serial D-Box or Parallel Pressure Manifold(s) LPP Other:
Artificial Drainage Required: Yes No If yes, please specify details:
<u>Legal Agreements</u> (If the answer is "Yes" to any type of legal agreements, please attach a copy of the agreement.)
Multi-party Agreement Required [Rule .0204(g)]: Yes No
Easement, Right-of-Way, or Encroachment Agreement Required [Rule .0204(d)]: Yes No
Declaration of Restrictive Covenants: Yes No Pre-Construction Conference Required: Yes No
Management Entity Required: Yes No Minimum O&M Requirements:
Sec Consultant Report for All Specificational
on Septic Systam IT IS ATTACHED TO This Desant
The requirements of 15A NCAC 18E are incorporated by reference into this permit and shall be met. Systems shall be installed in accordance with the attached site sketch. This Construction Authorization is subject to revocation if the site plan, plat, or the intended use changes. The Construction Authorization shall not be affected by a change in ownership of the site. This Construction Authorization 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. Authorized Agent's Printed Name: Authorized Agent's Signature: Date: Revised January 2024 Form CA-24.1

Harnett County Environmental Health

SITE SKETCH

PIN	Permit Number Blom 2404-0007
Ty	1 hon Cole
Applida	nt's Name Subdivision/Section/Lot Number 8-78-24
Authori	zed State Agent Date
	components represent approximate contours only. The contractor must flag the system prior to beginning the tion to ensure that the proper grade is maintained.
	Scale =
	+ See Consultant Report for Complete LAYUNT. TANKS SIZES + COCATION Of DINEW GEBILD, LENGTH + Depth
	CAYONT. IANKS SIZES & COCATION
	Of Drutentesta, leagth + Depth
	ARB All IN Report.
	* Contact Freezenmental Health WITH ANY guestions About Pennut
	WITH ANY guestions About Planut Plan to TNOVALL
	100000