



HARNETT COUNTY ENVIRONMENTAL HEALTH

File/Permit #: BRES2011-0047

CDP #: _____

IMPROVEMENT PERMIT (IP)

New Expansion Repair System Relocation Change of Use

Owner: Robin Johnson

Applicant: Robin Johnson

Property Location: 4485 Old Stage Rd

PIN/Lot Identifier: 0692-08-1120

Subdivision: _____

Lot #: _____ Block: _____ Section: _____

Facility Type: SWMH 14 x 80 Number of bedrooms: 3 Number of Occupants: 6 Other: _____

Design Daily Flow: 360 GPD LTAR (Initial): 0.4 gpd/ft² LTAR (Repair): 0.4 gpd/ft²

Wastewater System Type: 25% Reduction (Initial)

Pump Required: Yes No May be required Usable Depth to Limiting Condition (Initial): 40"

Wastewater System Type: 25% Reduction (Repair)

Pump Required: Yes No May be required Usable Depth to Limiting Condition (Repair): 40"

Effluent Standard: DSE HSE Other: _____ Type of Water Supply: Private well Municipal Supply Other: _____

Permit conditions:
No cutting or grading is allowed in the septic or repair areas. All foundation and gutter drains must be diverted away from septic area

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. This permit is subject to revocation if the site plan, plat, or the intended use changes. 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.

Authorized Agent's Printed Name: Maggie Watkins Date: 04/23/2026

Authorized Agent's Signature: *Maggie Watkins* Expiration Date: 04/23/2031

CONSTRUCTION AUTHORIZATION (CA)

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Lot #: _____ Block: _____ Section: _____

Facility Type: SWMH 14 x 80 Number of bedrooms: 3 Number of Occupants: 6 Other: _____

Design Daily Flow: 360 GPD LTAR: 0.4 gpd/ft²

Effluent Standard: DSE HSE Other: _____ Type of Water Supply: Private well Municipal Supply Other: _____

Installation Requirements/Conditions

Wastewater System Type: 25% Reduction Pump Required: Yes No May be required

Septic Tank Size: 1,000 gallons Total Trench Length: 230 feet Trench Spacing: 9 feet on center

Pump Tank Size: _____ gallons Maximum Trench Depth: 18-28 inches Soil Cover: 6 inches

Trench Width: 36 inches Distribution Method: Serial D-Box or Parallel Pressure Manifold Other: _____

Artificial Drainage Required: Yes No If yes, please specify details: _____

Management Entity Required: Yes No Minimum O&M Requirements: _____

Permit conditions:
No cutting or grading is allowed in the septic or repair areas. All foundation and gutter drains must be diverted away from the septic area

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: Maggie Watkins Date: 04/23/26

Authorized Agent's Signature: *Maggie Watkins* Expiration Date: 04/23/2031

Owner/Legal Representative Signature: _____ Date: _____

*See attached site sketch

