

**HARNETT COUNTY ENVIROMENTAL HEALTH**

File/Permit #: BRES2503-0014

CDP #:

IMPROVEMENT PERMIT (IP)

☒ New ☐ Expansion ☐ Repair ☐ System Relocation ☐ Change of Use

Owner: Icon Property Management LLC Applicant: Icon Property Management LLC

Property Location: 27 Bufford Ln (SR 1155) PIN/Lot Identifier: 9575-49-3413

Subdivision: O H MANGUM ESTS PH 2 Lot #: 25 Block: _____ Section: _____

Facility Type: 28'x68' DWMH Number of bedrooms: 4 Number of Occupants: 8 Other: _____

Design Daily Flow: 480 GPD LTAR (Initial): .8 gpd/ft² LTAR (Repair): .8 gpd/ft²

Wastewater System Type: 25% reduction (Initial)

Pump Required: ☒ Yes ☐ No ☐ May be required Usable Depth to Limiting Condition (Initial): 48

Wastewater System Type 25% reduction (Repair)

Pump Required: ☒ Yes ☐ No ☐ May be required Usable Depth to Limiting Condition (Repair): 48

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

Permit conditions:

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: Mark Osborne REHSDate: 07/08/2025Authorized Agent's Signature: [Signature]Expiration Date: 07/08/2030**CONSTRUCTION AUTHORIZATION (CA)**

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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: 1000 gallons Total Trench Length: 150 feet Trench Spacing: 9 feet on center

Pump Tank Size: 1000 gallons Maximum Trench Depth: 26 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:

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: Mark Osborne REHSDate: 07/08/25Authorized Agent's Signature: [Signature]Expiration Date: 07/08/2030

Owner/Legal Representative Signature: _____

Date: _____

***See attached site sketch**

Harnett County Environmental Health

SITE SKETCH

PIN 9575-49-3413

Permit Number BRES2503-0014

Icon Property Management LLC

O H MANGUM ESTS PH 2 25

Applicant's Name
Mark Osborne REHS

Subdivision/Section/Lot Number
07/08/2025

Authorized State Agent

Date

System components represent approximate contours only. The contractor must flag the system prior to beginning the installation to ensure that the proper grade is maintained.

Scale = NTS

