

Owner/Legal Representative Signature: _

HARNETT COUNTY ENVIROMENTAL HEALTH

	IMPROVEME	ENT PERMIT (IP)	CDP #:
New Owner: Shannon Seagroves	Expansion Repair	System Relocation	
Property Location: 478 Spring hil	I church Rd (SR 1238)		18-72-8762
Facility Type: 28'x68' DWMH	Number of bedrooms: 4	Number of Occupants: 8	Block: Section:
Design Daily Flow: 480	SPD LTAR (Initial): .4	gpd/ft ² LTAR (Repair):	.4 gpd/ft ²
Wastewater System Type: 25% re	duction		
	May be required Us		on (Initial): 48
Wastewater System Type 25% red	uction	(Repair)	
Pump Required: 🗌 Yes 🔲 No 🔳	May be required Us	sable Depth to Limiting Condition	on (Repair): <u>36</u>
Effluent Standard: 🔳 DSE 🔲 F	HSE Other: Type of	Water Supply: Private well	■ Municipal Supply Other:
Permit conditions:			
requirements. <u>This permit is subject to revoce</u> This permit is subject to compliance with the	ation if the site plan, plat, or the intended use provisions of 15A NCAC 18E and to the condi	<u>e changes.</u> The Improvement Permit sh itions of this permit.	h appropriate governing bodies in meeting their all not be affected by a change in ownership of the site
Authorized Agent's Signature:	Mah and REHO		Expiration Date: 05/20/2030
Owner: Shannon Seagroves	Expansion Repair	Applicant: Steven Ve	
	Il church Rd (SR 1238)	2.5 (0.00 g. 4) (0.00 methods) (0.00 methods) (0.00 methods) (1.00	518-72-8762
			Block: Section:
	SPD LTAR: .4 gpc		Other:
			■ Municipal Supply □Other:
nstallation Requirements/Condition		water supply. Thivate well	ividificipal supply
Wastewater System Type: 25% re		Pump Requi	red: Yes No May be required
Septic Tank Size: 1000 gallon	Total Trench Length: 300		g: 9 feet on center
Pump Tank Size. 1000 gallon	s Maximum Trench Depth: 28		
French Width: 36 inches		al D-Box or Parallel	
Artificial Drainage Required: Yes			
	es No Minimum O&M Requir		
Permit conditions:			
Construction Authorization is subject to revoc	cation if the site plan, plat, or the intended us	se changes. The Construction Authoriza	accordance with the attached site sketch. <u>This</u> tion shall not be affected by a change in ownership of as applicable, and to the conditions of this permit.
Authorized Agent's Printed Name: _	Mark Osborne REHS		05/20/25
Authorized Agent's Signature:	Mah an REF	$\mathcal{U}_{}$	Expiration Date: 05/20/2030
Owner/Legal Representative Signate		Date:	

*See attached site sketch

Date: _

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21	TE		N	г. І		١. ١	п

	051	18-7	72-87	762
PIN	UU	10-1	2-01	UZ

Permit Number BRES2504-0055

Steven Vest

Applicant's Name Mark Osborne REHS Subdivision/Section/Lot Number

Date

Authorized State Agent

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.

