

Owner/Legal Representative Signature:

Revised Cocotion

HARNETT COUNTY ENVIROMENTAL HEALTH

F H3F 1 A	1		F	ile/Permit #: BRES2507-0053
	IMI	PROVEME	NT PERMIT (IP)	DP #:
New Blake Caron	Expansion	Repair	System Relocation Applicant: Blake Caron	
Owner: Blake Caron			PIN/Lot Identifier: 0611-20-1262	
Property Location: 8370 US 421	PON AND PEN	A CARON		
Subdivision: TRACT 3 BLAKE CA	RON AND REN	A CARON	Lot #: BI	ock: Section:
Facility Type: 28 X88 DVVMH	Number of be	edrooms: 4	Number of Occupants:	Other:
Facility Type: 28'x68' DWMH Number of bedrooms: 4 Number of Occupants: 8 Other: Design Daily Flow: 480 GPD LTAR (Initial): .4 gpd/ft² LTAR (Repair): .4 gpd/ft² 259' reduction				
Wastewater System Type: 25% reduction (Initial)				
Pump Required: Yes No May be required Usable Depth to Limiting Condition (Initial): 34				
Wastewater System Type 25% reduction (Repair)				
Pump Required: Yes No May be required Usable Depth to Limiting Condition (Repair): 34 Effluent Standard: DSE HSE Other: Type of Water Supply: Private well Municipal Supply Other:				
Effluent Standard: DSE HS	E Other:	Type of V	Vater 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 pr	ovisions of 15A NCAC 18	E and to the conditi	ons of this permit.	0136
Authorized Agent's Printed Name: Mark Osborne REHS Authorized Agent's Signature: Mark Osborne REHS				
Authorized Agent's Signature:	ah de	READ		Expiration Date: 70 0
	CONSTR	LICTION A	LITHODIZATION (CA)	
_			UTHORIZATION (CA)	
Rlake Caron	Expansion	Repair	System Relocation	Change of Use
Owner: Blake Caron			Applicant: Blake Caron	1-20-1262
Property Location: 8370 US 421 Subdivision: TRACT 3 BLAKE CA	DON AND DEN	A CARON		
Subdivision: TRACT 3 BLAKE CA	RON AND REN	A CARON	Lot #: BI	ock: Section:
				_ Other:
Design Daily Flow: 480 GP				
		Type of V	Vater Supply: Private well	Municipal Supply Other:
Installation Requirements/Condition				
Wastewater System Type: 25% redu	ICHON	300		d: Yes No May be required
Septic Tank Size: 1000 gallons	Total Trench Le	ngth: 300	feet Trench Spacing:	g feet on center
Pump Tank Size: 1000 gallons				
				ressure Manifold Other:
Artificial Drainage Required: Yes				
Management Entity Required: Yes	No Minimur	m O&M Require	ments:	
Permit conditions:		5		
The requirements of 15A NCAC 18E are incorpor Construction Authorization is subject to revocat	ion if the site plan, plat,	or the intended use	changes. The Construction Authorizatio	n shall not be affected by a change in ownership of
the site. This Construction Authorization is subj	ect to compliance with t	the provisions of 15/	A NCAC 18E, or 15A NCAC 18A .1900, as a	pplicable, and to the conditions of this permit.
Authorized Agent's Printed Name: M	ark Osborne RE			Date: 10-6-75
Authorized Agent's Signature:	a- a-k	EEHS		Expiration Date: 10 -6-30

Date:

Harnett County Environmental Health

SITE SKETCH

0611-20-1262

Permit Number BRES2507-0053

Blake Caron

TRACT 3 BLAKE CARON AND RENA CARON

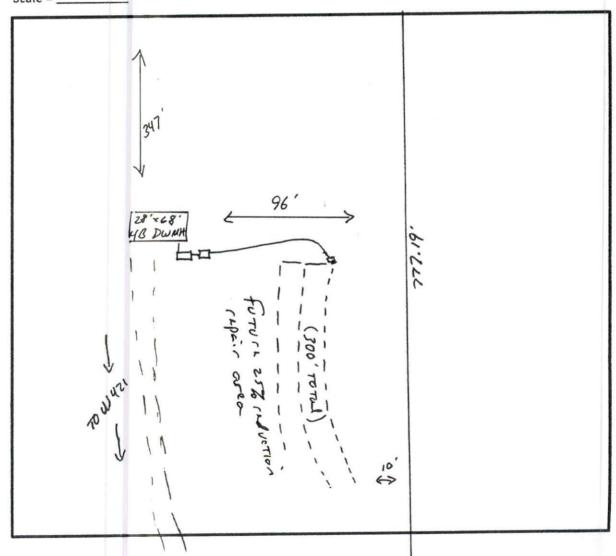
Applicant's Name Mark Osborne REHS Subdivision/Section/Lot Number 10 - 6 - 25

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



NCDHHS/DPH/EHS/OSWP

Revised January 2024 Form IP-24.1