HTE# 17-5-43636 Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: 3717 Christian Light R1. (Sn 1472) ISSUED TO: Everett J. Gardner SUBDIVISION SUBDIVISION LOT #

LOT #

LOT #

LOT # NEW EXPANSION 2 SFD Type of Structure: ___ = × T Proposed Wastewater System Type: CONV. / 25% NES Projected Daily Flow: ____ 366 Number of bedrooms: Number of Occupants: 6 max Basement Yes Pump Required: ☐Yes ■ No □ May be required based on final location and elevations of facilities Type of Water Supply:
Community Public Well Distance from well cot feet Permit valid for: - Five years Permit conditions: ■ No expiration Authorized State Agent:: CTANGE STEE ATTACHED SITE SKETCH The issuance of this permit by the Health Department 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 site 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 the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit. **Construction Authorization** (Required for Building Permit) The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .1957, .1958. and .1959 are incorporated by references into this permit and shall be met. Systems shall be installed in accordance with the attached system layout. ISSUED TO: Everett J. Gardner PROPERTY LOCATION: 2717 Christian Light Rd. (S214#2) SUBDIVISION _____ LOT # _______ LOT # ______ EXPANSION/ NELOCATION Basement? Yes No Basement Fixtures? Yes No Type of Wastewater System** _ CONVENTIONAL / 25% NED SYS. (Initial) Wastewater Flow: 360 GPD (See note below, if applicable PUMP TO CONV. DEPAIR (Repair) Installation Requirements/Conditions Number of trenches ______ a____ Exact length of each trench 50 feet Trench Spacing: _____ Feet on Center Septic Tank Size _____ gallons Soil Cover: 12 > 6 inches Pump Tank Size _____ gallons Trenches shall be installed on contour at a Maximum Trench Depth of: 24→18 inches (Maximum soil cover shall not exceed (Trench bottoms shall be level to +/-1/4" 36" above the trench bottom) in all directions) Pump Requirements: _____ft. TDH vs. ____ GPM WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM ANY PART OF SEPTIC SYSTEM OR REPAIR AREA. NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD AREA. **If applicable: I understand the system type specified is different from the type specified on the application. I accept the specifications of this permit. Owner/Legal Representative Signature: This Construction Authorization is subject to revocation if the site plan, plat, or the intended use changes. The Construction Authorization shall not be transferred when there is a change in ownership of the site. This Construction Authorization is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit. SEE ATTACHED SITE SKETCH Authorized State Agent: Date: 09/05/2019 Construction Authorization Expiration Date: 09/05/0000

Harnett County Department of Public Health Site Sketch

ISSUED TO:Everete Authorized State Agent:	SUBDIVISION_	hristicn Light Pld. (5/2 1412) LOT # :09/05/2017
	20 x 80 30 x 80 30 x 80 60 x 1 10 x 1 x 2 10 x 1 x 2 10	Expansion Requisements ** Albandon existing existing lines under addition * Add two equivient lines below * Replace/Relocate D-Box * Add Risers to Septic ** Verify or Add Filter and tank integrity

PUMP TO

CONV. REPAIR

Department of Environment,	Health	and	Natural	Resources
Division of Environmental He	ealth			
On-Site Wastewater Section				

Wastewater Section	
SOIL/SITE EVALUATION	
for ON-SITE WASTEWATER SYSTEM	

Sheet:	
Property ID:	
Lot #:	
File #:	
Code:	

Owner: Applicant: Everett Cardre	
Address: 2914 Christia Lt. 21 Date Evaluated: 09/08/17	
Proposed Facility: 391 5F7 Design Flow (.1949): 360 GCS	Property Size: 1.136 4 (
Location of Site: Property Recorded: 125	
Water Supply: Public Individual Well	☐ Spring ☐ Other
Evaluation Method: Auger Boring Pit Cut	
Type of Wastewater: Sewage Industrial Process	Mixed

ì	.1940		SOIL MORPHOLOGY .1941		OTHER PROFILE FACTORS				
	Landscape Position/ Slope %	Horizon Depth (In.)	.1941 Structure/ Texture	.1941 Consistence Mineralogy	.1942 Soil Wetness/ Color	.1943 Soil Depth (IN.)	.1956 Sapro Class	.1944 Restr Horiz	Profile Class & LTAR
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Description	Initial	Repair System	Other Factors (.1946):
	System		Site Classification (.1948): Prosionally Suitable
Available Space (.1945)			Evaluated By: A 1 2 () 5 1
System Type(s)	25'10 Med.		Others Present: Andrew Currin, nEHS
Site LTAR	U.LI	6.4	