

HTE# Repair

Harnett County Department of Public Health

29513

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

ISSUED TO: _____ PROPERTY LOCATION: _____
 SUBDIVISION _____ LOT # _____
 NEW REPAIR EXPANSION Site Improvements required prior to Construction Authorization Issuance: _____
 Type of Structure: _____
 Proposed Wastewater System Type: _____
 Projected Daily Flow: _____ GPD
 Number of bedrooms: _____ Number of Occupants: _____ max
 Basement Yes No
 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 _____ feet
 Permit conditions: _____ Permit valid for: Five years No expiration

Authorized State Agent: _____ Date: _____ SEE 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: SAMUEL BENEDICT PROPERTY LOCATION: 750 CABIN CREEK LN
 SUBDIVISION _____ LOT # _____
 Facility Type: SFO New Expansion Repair
 Basement? Yes No Basement Fixtures? Yes No
 Type of Wastewater System** Pump To 25% REDUCTION SYSTEM (Initial) Wastewater Flow: 360 GPD
 (See note below, if applicable)

(Repair)
Installation Requirements/Conditions
 Septic Tank Size Existing 6 gallons
 Pump Tank Size 1000 gallons
 Number of trenches 1
 Exact length of each trench 260 feet
 Trenches shall be installed on contour at a
 Maximum Trench Depth of: 18 inches
 (Trench bottoms shall be level to +/-1/4"
 in all directions)
 Trench Spacing: 9 Feet on Center
 Soil Cover: 6 inches
 (Maximum soil cover shall not exceed
 36" above the trench bottom)
 Pump Requirements: _____ ft. TDH vs. _____ GPM
 Aggregate Depth: _____ inches below pipe
 _____ inches above pipe
 _____ inches total
 Conditions: _____

**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: _____ Date: _____

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: [Signature] Date: 5/8/17
 Construction Authorization Expiration Date: 5/8/22

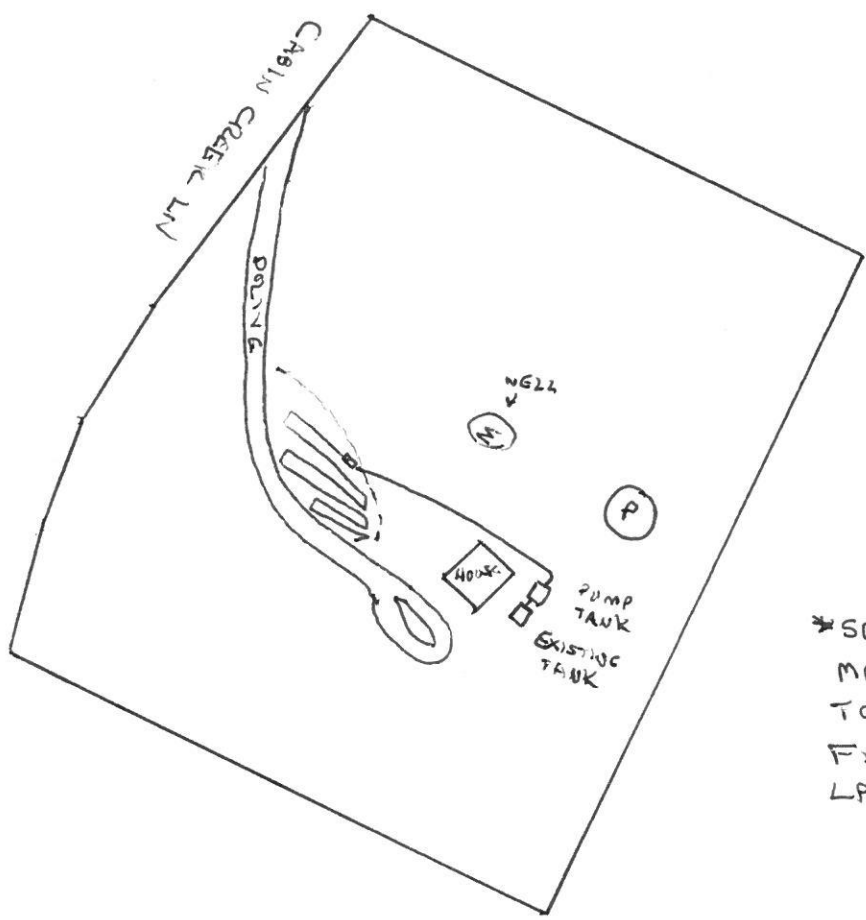
HTE# REPAIR

Permit # 29513

Harnett County Department of Public Health Site Sketch

ISSUED TO: SAMUEL BENEDICT PROPERTY LOCATOR: 750 CABIN CREEK LN
SUBDIVISION _____ LOT # _____

Authorized State Agent: ~~_____~~ RENS (GUYER TOLKSDORF) Date: 5/8/17



*SERVIC CONTRACTOR TO MEET ON SITE PRIOR TO INSTALLATION TO FINALIZE DRAIN FIELD LAYOUT

HARNETT COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SECTION
307 W. CORNELIUS HARNETT BLVD.
LILLINGTON, NC 27546
910-893-7547 PHONE
910-893-9371 FAX

5/8/17 Agw
\$100.00 Refunded

17-5-41133
Repair will have HTE#

Application for Repair

Needs Repair per QT - See land use

NAME Samuel Benedict EMAIL ADDRESS: _____
PHONE NUMBER for info
PHYSICAL ADDRESS 750 Cabin Creek Ln - Cameron Nc
MAILING ADDRESS (IF DIFFERENT THAN PHYSICAL) same
IF RENTING, LEASING, ETC., LIST PROPERTY OWNER NAME _____

SUBDIVISION NAME _____ LOT #/TRACT # _____ STATE RD/HWY _____ SIZE OF LOT/TRACT _____
Type of Dwelling: Modular Mobile Home Stick built Other _____
Number of bedrooms _____ Basement
Garage: Yes No Dishwasher: Yes No Garbage Disposal: Yes No
Water Supply: Private Well Community System County

Directions from Lillington to your site: _____
See land use

- In order for Environmental Health to help you with your repair, you will need to comply by completing the following:**
1. A "surveyed and recorded map" and "deed to your property" must be attached to this application. Please inform us of any wells on the property by showing on your survey map.
 2. The outlet end of the tank and the distribution box will need to be uncovered and property lines flagged. After the tank is uncovered, property lines flagged, underground utilities marked, and the orange sign has been placed, you will need to call us at 910-893-7547 to confirm that your site is ready for evaluation.
- Your system must be repaired within 30 days of issuance of the Improvement Permit or the time set within receipt of a violation letter. (Whichever is applicable.)

By signing below, I certify that all of the above information is correct to the best of my knowledge. False information will result in the denial of the permit. The permit is subject to revocation if the site plan, intended use, or ownership changes.

Signature _____ Date _____

Initial Application Date: 4/10/17

Application # 17-50041133

CU# _____

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION
Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.harnett.org/permits

"A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION"

LANDOWNER: Samuel Benedict Mailing Address: 750 Cabin CK Lane

City: Cameron State: NC Zip: 28326 Contact No: 253-691-0289 Email: _____

APPLICANT: Same Mailing Address: _____

City: _____ State: _____ Zip: _____ Contact No: _____ Email: _____

*Please fill out applicant information if different than landowner



CONTACT NAME APPLYING IN OFFICE: _____ Phone # _____

PROPERTY LOCATION: Subdivision: - NA - Lot #: _____ Lot Size: 5 acres

State Road # 750 State Road Name: Cabin Creek Lane Map Book & Page: 2014 / 228

Parcel: 099503 0024 PIN: 9563-43-5766.000

Zoning: PA-20R Flood Zone: X Watershed: GIS Deed Book & Page: 3237 / 367 Power Company*: _____

*New structures with Progress Energy as service provider need to supply premise number _____ from Progress Energy.

NO layout 1982 Dwelling

PROPOSED USE:

SFD: (Size _____ x _____) # Bedrooms: _____ # Baths: _____ Basement(w/wo bath): _____ Garage: _____ Deck: _____ Crawl Space: _____ Slab: _____ Slab: _____
(Is the bonus room finished? () yes () no w/ a closet? () yes () no (if yes add in with # bedrooms))

Mod: (Size _____ x _____) # Bedrooms _____ # Baths _____ Basement (w/wo bath) _____ Garage: _____ Site Built Deck: _____ On Frame _____ Off Frame _____
(Is the second floor finished? () yes () no Any other site built additions? () yes () no

Manufactured Home: _____ SW _____ DW _____ TW (Size _____ x _____) # Bedrooms: _____ Garage: _____ (site built? _____) Deck: _____ (site built? _____)

Duplex: (Size _____ x _____) No. Buildings: _____ No. Bedrooms Per Unit: _____

Home Occupation: # Rooms: _____ Use: _____ Hours of Operation: _____ #Employees: _____

Addition/Accessory/Other: (Size _____ x _____) Use: septic drain field upgrade Closets in addition? () yes () no

Water Supply: County _____ Existing Well _____ New Well (# of dwellings using well _____) *Must have operable water before final

Sewage Supply: _____ New Septic Tank (Complete Checklist) Existing Septic Tank (Complete Checklist) _____ County Sewer

Does owner of this tract of land, own land that contains a manufactured home within five hundred feet (500') of tract listed above? () yes () no

Does the property contain any easements whether underground or overhead () yes () no

Structures (existing or proposed): Single family dwellings: _____ Manufactured Homes: _____ Other (specify): _____

Required Residential Property Line Setbacks:


	Minimum	Actual
Front	_____	_____
Rear	_____	_____
Closest Side	_____	_____
Sidestreet/corner lot	_____	_____
Nearest Building on same lot	_____	_____

Comments: *Customer is looking to upgrade drain field only - needs inspection on existing tank & drain field *

4-10-17 S

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: _____

If permits are granted I agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plans submitted. I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.

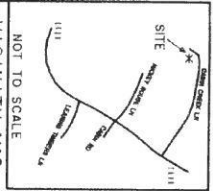


Signature of Owner or Owner's Agent

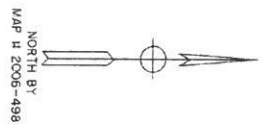
10 April 2017
Date

It is the owner/applicants responsibility to provide the county with any applicable information about the subject property, including but not limited to: boundary information, house location, underground or overhead easements, etc. The county or its employees are not responsible for any incorrect or missing information that is contained within these applications.

This application expires 6 months from the initial date if permits have not been issued



NOT TO SCALE



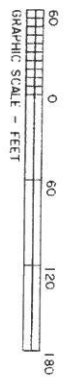
DUSTIN LEE MOORE
D.B. 2094, PG. 941
MAP H 2004-380

WALTER H. MOORE JR.
D.B. 1993, PG. 638
MAP H 2004-568

CABIN CREEK LANE
60' R/W (SOIL ROAD)
(STATE MAINTAINED)
(PUBLIC ROAD)

TIMOTHY ZAUSTRA
D.B. 2238, PG. 289
PARCEL A
MAP H 2006-498

CLYDE L. PATTERSON
D.B. 2780, PG. 492
TRACT 11
MAP H 2000-305



TOTAL AREA
3.007 AC.



I, MELVIN A. GRAHAM, CERTIFY THAT THIS PLAN WAS DRAWN UNDER MY SUPERVISION FROM AN ACTUAL SURVEY MADE UNDER MY SUPERVISION (DEED DESCRIPTION RECORDED IN BOOK 730, PAGE 308) THAT THE BOUNDARIES NOT SUPERSEDED BY THIS PLAN AND PAGE 308 ARE CORRECT AND THAT THE INFORMATION FOUND IN THIS PLAN AND PAGE 308 IS TRUE AND CORRECT AND THAT THE AREA CALCULATED IS 1: 10,000 THAT THE PLAN WAS PREPARED IN ACCORDANCE WITH G.S. 47-20 AS AMENDED, WITNESS MY ORIGINAL SIGNATURE, REGISTRATION NUMBER AND SEAL.

THIS 7 DAY OF AUGUST A. 2014

Melvin A. Graham, PLS
REGISTRATION NUMBER 1-3471

NOTES: SURVEY IS OF AN EXISTING PARCEL OR PARCELS OF LAND AND DOES NOT CREATE A NEW TRACT OR SURVEY.

STATE OF NORTH CAROLINA
COUNTY OF HARNETT
REGISTERED PROFESSIONAL SURVEYOR
MELVIN A. GRAHAM, PLS
REGISTRATION NUMBER 1-3471

DATE: 8/11/14
REVIEW OFFICER: [Signature]

NOTES:
PROPERTY CONSIST OF ALL OF THE JAMES M. HARDWICK AND CYNTHIA R. HARDWICK PROPERTY AS RECORDED IN D.B. 730, PG. 585 HARNETT COUNTY REGISTRY.

ALL AREAS BY COORDINATE METHOD
PIN H 9563-43-5766-000
PARCEL ID H 089563 0024
REID H 0013650
PROPERTY ZONED RA-20R



MINIMUM BUILDING SETBACKS
FRONT - 35'
SIDE REAR - 25'

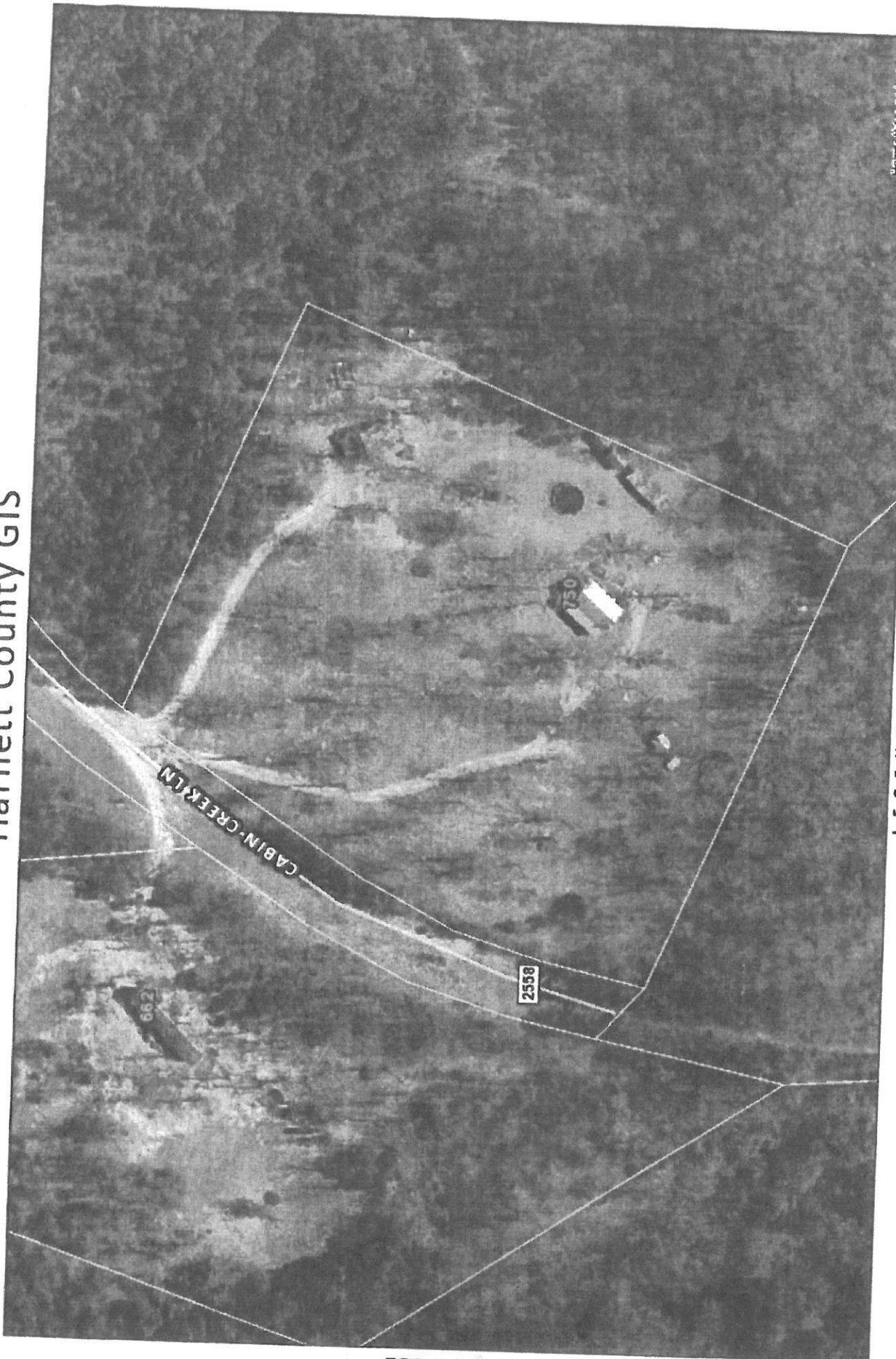
THIS PROPERTY IS NOT IN A SPECIAL FLOOD HAZARD AREA ACCORDING TO MAP NUMBER 371092820K OF THE FEDERAL EMERGENCY MANAGEMENT AGENCY. EPI, DATE: OCT. 17, 2008

RECORDED AT THE HARNETT COUNTY CLERK'S OFFICE ON THE 7 DAY OF AUGUST 2014 BY [Signature]

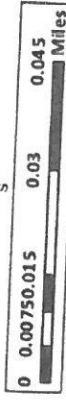
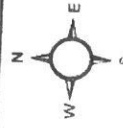
TOWNSHIP	COUNTY	STATE
JOHNSONVILLE	HARNETT	NC
SURVEY FOR	DATE:	
SAM & KRISTIN BENEDICT 750 CABIN CREEK LANE CAMERON, NC 28326	08/07/2014	
OWNER: JAMES M. HARDWICK 750 CABIN CREEK LANE CAMERON, NC 28326	SCALE:	
	1" = 60'	
MELVIN A. GRAHAM, PLS. 3579 NICHOLSON ROAD CAMERON, NC 28326 PHONE: (919) 499-6174	PROJECT:	
	7014	
	REV'S (M):	

Harnett County GIS

NOT FOR LEGAL USE



HARNETT COUNTY GIS



1 inch = 142 feet

LEGEND

- Surrounding County Boundaries
- Federal Property
- City Limits
- Address Numbers
- Airport
- Major Roads
- Interstate
- NC
- US
- Roads
- Railroad
- Tax Parcels
- Cape Fear River

GIS/E-911 Addressing

April 10, 2017

NAME: Sam Benedict

APPLICATION #: 17-50041133

This application to be filled out when applying for a septic system inspection.

County Health Department Application for Improvement Permit and/or Authorization to Construct

IF THE INFORMATION IN THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT PERMIT OR AUTHORIZATION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration depending upon documentation submitted. (Complete site plan = 60 months; Complete plat = without expiration)

910-893-7525 option 1

CONFIRMATION # LM PP 4/10 021557

Environmental Health New Septic System Code 800

- **All property irons must be made visible.** Place "pink property flags" on each corner iron of lot. All property lines must be clearly flagged approximately every 50 feet between corners.
- Place "orange house corner flags" at each corner of the proposed structure. Also flag driveways, garages, decks, out buildings, swimming pools, etc. Place flags per site plan developed at/for Central Permitting.
- Place orange Environmental Health card in location that is easily viewed from road to assist in locating property.
- If property is thickly wooded, Environmental Health requires that you clean out the **undergrowth** to allow the soil evaluation to be performed. Inspectors should be able to walk freely around site. **Do not grade property.**
- **All lots to be addressed within 10 business days after confirmation. \$25.00 return trip fee may be incurred for failure to uncover outlet lid, mark house corners and property lines, etc. once lot confirmed ready.**
- After preparing proposed site call the voice permitting system at 910-893-7525 option 1 to schedule and use code 800 (after selecting notification permit if multiple permits exist) for Environmental Health inspection. Please note confirmation number given at end of recording for proof of request.
- Use Click2Gov or IVR to verify results. Once approved, proceed to Central Permitting for permits.

Environmental Health Existing Tank Inspections Code 800

- Follow above instructions for placing flags and card on property.
- Prepare for inspection by removing soil over **outlet end** of tank as diagram indicates, and lift lid straight up (if possible) and then **put lid back in place.** (Unless inspection is for a septic tank in a mobile home park)
- **DO NOT LEAVE LIDS OFF OF SEPTIC TANK**
- After uncovering **outlet end** call the voice permitting system at 910-893-7525 option 1 & select notification permit if multiple permits, then use code 800 for Environmental Health inspection. Please note confirmation number given at end of recording for proof of request.
- Use Click2Gov or IVR to hear results. Once approved, proceed to Central Permitting for remaining permits.

SEPTIC

If applying for authorization to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.

- Accepted Innovative Conventional Any
 Alternative Other _____

The applicant shall notify the local health department upon submittal of this application if any of the following apply to the property in question. If the answer is "yes", applicant **MUST ATTACH SUPPORTING DOCUMENTATION**:

- YES NO Does the site contain any Jurisdictional Wetlands?
 YES NO Do you plan to have an irrigation system now or in the future?
 YES NO Does or will the building contain any drains? Please explain. _____
 YES NO Are there any existing wells, springs, waterlines or Wastewater Systems on this property?
 YES NO Is any wastewater going to be generated on the site other than domestic sewage?
 YES NO Is the site subject to approval by any other Public Agency?
 YES NO Are there any Easements or Right of Ways on this property?
 YES NO Does the site contain any existing water, cable, phone or underground electric lines?

If yes please call No Cuts at 800-632-4949 to locate the lines. This is a free service.

I Have Read This Application And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And State Officials Are Granted Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules.

I Understand That I Am Solely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making The Site Accessible So That A Complete Site Evaluation Can Be Performed.

Sam J. Benedict
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

10 April 2017
DATE