HTE# 17-5-40588

Harnett County Department of Public Health

29180

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

ISSUED TO: Wellons Realty INC

PROPERTY LOCATION SR 1703 Cameron Hill RD

SUBDIVISION _____ LOT # _____

NEW ☑ REPAIR ☐ EXPANSION ☐

Type of Structure: SFD

Proposed Wastewater System Type: 25% Reduction

Projected Daily Flow: 360 GPD

Number of bedrooms: 3 Number of Occupants: 6 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: _____

Site Improvements required prior to Construction Authorization Issuance: _____

Permit valid for: ☑ Five years ☐ No expiration

Authorized State Agent: James E Mashburn Date: 2-22-17 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: Wellons Realty INC

PROPERTY LOCATION SR 1703 Cameron Hill RD

SUBDIVISION _____ LOT # _____

Facility Type: SFD ☑ New ☐ Expansion ☐ Repair

Basement? ☐ Yes ☑ No Basement Fixtures? ☐ Yes ☑ No

Type of Wastewater System** 25% Reduction System (Initial) Wastewater Flow: 360 GPD

(See note below, if applicable ☐)

25% Reduction (Repair)

Installation Requirements/Conditions

Septic Tank Size 1000 gallons

Pump Tank Size _____ gallons

Number of trenches 3

Exact length of each trench 100 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: 6 inches below pipe, 2 inches above pipe, 12 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: James E Mashburn Date: 2-22-17

Construction Authorization Expiration Date: 2-22-21

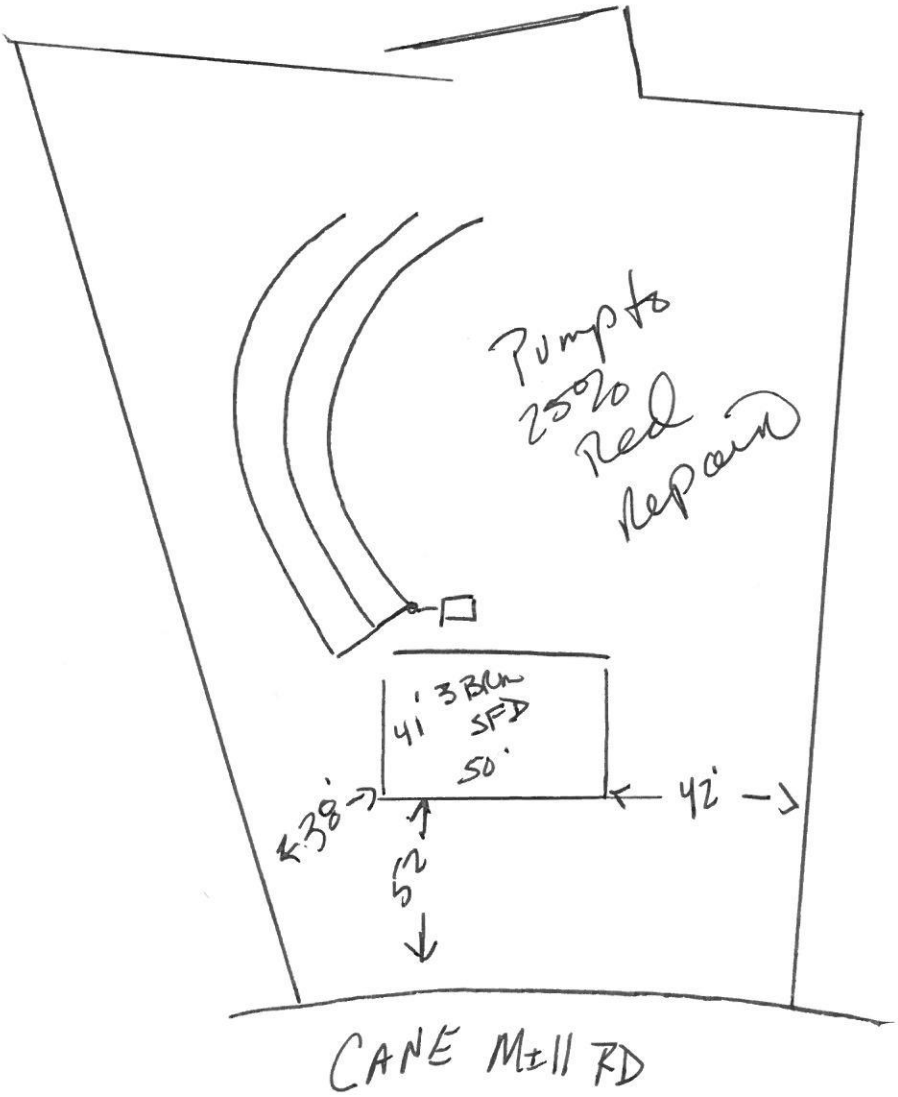
HTE# 17-5-40588 Permit # 29180

Harnett County Department of Public Health
Site Sketch

PROPERTY LOCATION 1700 CANE Mill RD

ISSUED TO: Wellons Realty INC SUBDIVISION _____ LOT # _____

Authorized State Agent: James E Manhart III REHS Date: 2-22-17



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

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

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

Owner: Applicant: Weeler
Address: Date Evaluated: 2-20-17
Proposed Facility: SFD Design Flow (.1949): 3bed Property Size:
Location of Site: Property Recorded:
Water Supply: ☑ Public ☐ Individual ☐ Well ☐ Spring ☐ Other
Evaluation Method: ☑ Auger Boring ☐ Pit ☐ Cut
Type of Wastewater: ☑ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 Landscape Position/ Slope %	Horizon Depth (In.)	SOIL MORPHOLOGY .1941		OTHER PROFILE FACTORS				Profile Class & LTAR
			.1941 Structure/ Texture	.1941 Consistence Mineralogy	.1942 Soil Wetness/ Color	.1943 Soil Depth (IN.)	.1956 Sapro Class	.1944 Restr Horiz	
1,2	5%	0-5	LDM	FR GU NONO					
3		5-46	SC-C (Kg)	Fr | 38hs.p BLR	3-34 3.1				3

Description	Initial System	Repair System
Available Space (.1945)	/	/
System Type(s)	252	213
Site LTAR	.3	.3

Other Factors (.1946):
Site Classification (.1948): PS
Evaluated By:
Others Present: