29883

HTE#_ 18-5-43830

Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only an Improvement Permit
ISSUED TO: Foseph Mark Wilkinson SUBDIVISION PROPERTY LOCATION: 12 ives Read (52 1418)
NEW REPAIR EXPANSION EXPANSION Site Improvements required prior to Construction Authorization Issuance:
Type of Structure: 430 59' x 30' 5 = 50
Proposed Wastewater System Type: 25% Reduction 5,5
Projected Daily Flow: 486 GPD
Number of bedrooms: 4 Number of Occupants: 8 max
Basement Des 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 valid for: Five years Permit conditions:
No expiration
Authorized State Agent:: Caracter State Agent: Date: 02/22/20/8 SEE ATTACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guarantees the issuance of other permit. The permit bolder is responsible for checking with appearance and the permit by the Health Department in no way guarantees the issuance of other permit.
she is subject to revocation if the site plan, plat, or the interneed use changes. The improvement Permit shall not be affected by a change in ownership of the cite. This parmit is subject to revocation if the site plan, plat, or the interneed use changes.
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: Joseph Mark Wilkinson PROPERTY LOCATION: River Road (SR 1418) SUBDIVISION LOT # 2
SUBDIVISION 10T # 2
Facility Type: 4872 591×301 SFS New Expansion Repair
Basement? Ves No Basement Fixtures? Yes No
Type of Wastewater System** 25% nedvition 35tem (Initial) Wastewater Flow: 480 GPD
(See note below, if applicable \square)
25% Reduction 5/8. (Repair)
Installation Requirements/Conditions Number of trenches
Septic Tank Size 1250 gallons Exact length of each trench 100 feet Trench Spacing: 9 Feet on Center
Pump Tank Size gallons
Maximum Trench Depth of: 44 inches (Maximum soil cover shall not exceed
The state of the s
(Trench bottoms shall be level to +/-1/4" 36" above the trench bottom) in all directions)
)
inches below pipe
Conditions: Three(3) 135ft lines ove permissible Aggregate Depth: NA inches above pipe NA inches total
inches total
VATED LINES (INCLUDING IDDICATION) MUST BE LOST, EDGIN ANY PART OF SERVICE SYSTEM OF PERMIT
VATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM ANY PART OF SEPTIC SYSTEM OR REPAIR AREA.
O 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.
, ,, , , , , , , , , , , , , , , , , ,
wner/Legal Representative Signature: Date:
is 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
onstruction 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
uthorized State Agent: Oalaa laak
ANDREW WRAID Construction Authorization Expiration Date: 00/20/30083
Administration regularity parc. Oct and toward

Harnett County Department of Public Health Site Sketch

T.	PROPERI	Y LOCATON: YZIVES	recad (SN 1918))
ISSUED TO:	eph Mark Wilkinson SUI	BDIVISION	LOT #	3
Authorized State Agent:		Date: _	0 a [22 2018	
K some	ANDREW CUR	1		proper
I P	482 SFD 121	1000 10	REPAIR	15 C 15 E
PO	591×30	ATER IF	25% 100(4)	
	EXT	1 km		
* Three (3)	POND 135FL lines are perm	issible	7	
* May require	e to meet onsite o install		VER RD	

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: Joseph Mark wilkisen		
Address: Date Evaluated: 02/2118		
Proposed Facility: 430 SED Design Flow (.1949): 480 GPD	Property Size:	45.33 AC
Property Recorded: Property Reco	•	12-12-12-12-12-12-12-12-12-12-12-12-12-1
Water Supply: Public Individual Well	☐ Spring	Other
Evaluation Method: Auger Boring Pit Cut		
Type of Wastewater: Sewage Industrial Process	☐ Mixed	

R O F	.1940 Landscape Position/ Slope %	Horizon	SOIL MORPHOLOGY		P	OTHER PROFILE FACTORS			
E #		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
1	L 468	0-8	6ª L	FI 5 8 18p					P3
		8-48	or c	FISPIER	y	42			0.3
9	146%	08	CRL	A Golden					
		8-42	9K C	9 38 756					P3
		42+	Povent	9 58 3869 -	d	42			0.3
100.0		315							
						= =			
							10.7		
					7				

Description	Initial System	Repair System	Si
Available Space (.1945)	V		51
System Type(s)	25% UE	25% WE	
Site LTAR	1) 3	0.3	

Other Factors (.1946):

ite Classification (.1948): Provisionally Suitable
Evaluated By:
Others Present: