29926

HTE# 18-5-43491 Harnett County Department of Public Health Improvement Permit

Improvement Permit

SINGER TO: SPANISON	A building permit cannot be issued with only an Improvement Permit
Site Improvements required prior to Construction Authorization Issuance: Tripped Structure: 36.92 SEVAN	PROPERTY LOCATION: Cedar Rock Tol. (CoVictory Rd. 52 140
Type of Water Supply: Speed Pally Prov: 35 C GPD Number of befroom: 3 Number of Occupants:	
Proposed Bally Flow: 360 GPD Number of Dectroons: 3 Number of Occupants:	NEW Later REPAIR Later LEXPANSION Later Site Improvements required prior to Construction Authorization Issuance:
Projected Daily Flow: Second Community Second Community Public Well Distance from well Second Continues Permit valid for: Two years Permit conditions: Date: Second Continues Permit valid for: Two years Permit conditions: Permit conditions Permit conditions: Permit con	Type of Structure: 367 58 × 54 3752
Number of bedrooms: 3 Number of Occupants:	
Basement repairments repairments of Rules 1550 1554 1555 1556 1575 157	
Pump Requirements:	
Type of Water Supply: Community Public Well Distance from well	
Authorized State Agent: Authorized State Agent:	The state of the s
Authorized State Agent: The issuance of this permit by the Health Department in no way guarantees the issuance of other permit. The permit baller is responsible for chesting with appropriate governing bodies in meeting that requirements. This is subject to recompliance with the permit of the laws and Bules for Sewage Treatment and Disposal and to conditions of this permit. Construction Authorization (Required for Building Permit)	The contract and contract to the contract to t
The issuance of this permit by the Health Department in no way guarantees the issuance of other permits. The permit folder is regionable for checking with appropriate governing bodies in meeting their requirements. This is subject to recompliance 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)	Terrific Collections.
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The issuance of this permit by the Health Department in no way guarantees the issuance of other permits. The permit folder is repéctore because if the step and pack or the intended uschange. The improvement Permit shall not be affected by a change in ownership of the size. 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	Authorized State Agent: SEE ATTACHED SITE SKETCH
Required for Building Permit	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 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. SUBDIVISION	Construction Authorization
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. SUBDIVISION	(Required for Building Permit)
Source Shark Subdivision Cadar Rock Tr. (Coldabor R.) Facility Type: 38 1 58 × 54 57	
PROPERTY LOCATION: Carlot Rock Tr. Collecting Relativity Relativity Type: 36 1 58 56 56 56 56 56 56 56 56 56 56 56 56 56	
Subdivision Calculation Repair	
Facility Type: 367 58 X64 5FT	
Basement? Yes No Basement Fixtures? Yes No Type of Wastewater System** See note below, if applicable	SUBDIVISION CERCIT ROCK LUI # 11
Type of Wastewater System** At. Grade 25% Neduction System (Initial) Wastewater Flow: 360 GPD (See note below, if applicable All Grade 25% Neduction System (Initial) Wastewater Flow: 360 GPD (See note below, if applicable All Grade 25% Neduction System (Initial) Wastewater Flow: 360 GPD (See note below, if applicable All Grade 25% Neduction System (Initial) Wastewater Flow: 360 GPD (Repair) Installation Requirements/Conditions	
See note below, if applicable	
Installation Requirements/Conditions Number of trenches 3 Septic Tank Size 1000 gallons Exact length of each trench 125 feet Trench Spacing: Feet on Center Pump Tank Size gallons Trenches shall be installed on contour at a Soil Cover: 6 inches (Trench Spacing) 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 Aggregate Depth: NA inches below pipe inches above pipe Conditions: On Contour D-Box Equal Distribution Required 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.	, and the same of
Installation Requirements/Conditions Number of trenches 3 Septic Tank Size 1000 gallons Exact length of each trench 125 feet Trench Spacing: Feet on Center Pump Tank Size gallons Trenches shall be installed on contour at a Maximum Trench Depth of: 12 inches Maximum Trench Depth of: 12 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 Aggregate Depth: NA inches below pipe Conditions: On Contour Depth of: Distribution Reguired NA inches below pipe Conditions: On Contour Depth of: Distribution Reguired NA inches total 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: Understand the system type specified is different from the type specified on the application. accept the specifications of this permit.	
Installation Requirements/Conditions Number of trenches 3 5 5 5 5 5 5 5 5 5	Ht-Grade 256 Red. S15, (Repair)
Pump Tank Size gallons	Installation Requirements/Conditions Number of trenches 3
Maximum Trench Depth of: 12 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 Aggregate Depth: inches below pipe Conditions: O O O	Septic Tank Size 1000 gallons Exact length of each trench 125 feet Trench Spacing: 7 Feet on Center
Maximum Trench Depth of: 1 d 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:	Pump Tank Size gallons Trenches shall be installed on contour at a Soil Cover: inches (Total Cover:
(Trench bottoms shall be level to +/-1/4" 36" above the trench bottom) in all directions) Pump Requirements: ft. TDH vs GPM Aggregate Depth: inches below pipe Conditions: CONTOUR D-Box Equal Distribution Required Depth: Aggregate Depth: inches above pipe 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: / understand the system type specified is different from the type specified on the application. / accept the specifications of this permit.	Maximum Trench Depth of: 12 inches (Maximum soil cover shall not exceed
Pump Requirements:ft. TDH vsGPM	
Pump Requirements:	
Aggregate Depth: NA inches above pipe Conditions: On Constant D-Box Equal Distribution required NA inches total GIN Approved Imported Top Soil Reguired 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.	, and the same of
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	**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:	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	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: 03/23/2018	Authorized State Agent: Date: 03/23/2018
ANDREW CURAIN Construction Authorization Expiration Date: 03/23/2023	

HTE# 18-5-43491 18-5-43492 Harnett County Department of Public Health ISSUED TO: Steppen Shankin 1 1 1 Date: ____ C3 (23/2018) Authorized State Agent: INDAKES CURRIN · Idio MAX AT LOW END * May require to * meet onsite AT-GRADE prior to install 25% REDUCTION REDAIR AREA 25% NESSOLCION 545. proposies のしむ 17 PROPOSESS 38a 54 SFD 581 2941 BATH ALUNG EXT #On Contain D-Box Ferry DRIVEWAY Distribution required *Gin + Approved Imported Top Soil Required (At Grade) * Additional depth may be granted with Pit Evaluation due to soporlite pestrictive horizion TRAIL

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: Applie	cant: Steven	Smarkin	2/22/2018		
Address: Ceder Occk (Proposed Facility: 332 5	Des Des	Evaluated:	03/23/2018 49): 360 80 d: 485	Property Size:	10.88AC
Location of Site: Water Supply:	Public	Individual	☐ Well _	☐ Spring	Other
Evaluation Method: Type of Wastewater:	Sewage	☐ Pit☐ Ind	ustrial Process	Mixed	

P R O F I .1940			SOIL MORPHOLOGY .1941		OTHER PROFILE FACTORS				
L E #	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
1,2,4	L 2-7%	0.8	CL 3L	FR 358 34					
		8-27	BK C	E131854					Ulps
		274	Suportite	12 398 34 E1 31 8Eg		27			0.25
3,5	L 2-76	0.8	CR SL	FL 354 /150 FI 5 (3/50)					
		8-34	BKC	F1 5 8 3 Kgp					U/PS 0.3
		34	Saperlite	_		34	0		0.3
				*-					
				-					
						-			

Description	Initial	Repair System	Other Factors (.1946):
	System		Site Classification (.1948): Unsuitable / Provisionally Suitable
Available Space (.1945)			
System Type(s)	25% red	25% red	Others Present: Andrew Curan, nexts
Site LTAR	6.25	0.35	