Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: 9651 NC Triangle Home Pros. LL. SUBDIVISION ISSUED TO: NEW 🕝 Site Improvements required prior to Construction Authorization Issuance: Type of Structure: 2B0 47×48' SFN Proposed Wastewater System Type: 25% Nedwelion Sis. Projected Daily Flow: 240 GPD Number of Occupants: 4 max Number of bedrooms: Basement Yes Pump Required: □Yes 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:: Date: 04/13/2018 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 ISSUED TO: Triangle Home Proso, LCC PROPERTY LOCATION: 9651 NC 42

SUBDIVISION LOT # IR ☐ Expansion ☐ Repair Basement? Yes 25% neduction System (Initial) Wastewater Flow: 240 GPD Type of Wastewater System** (See note below, if applicable [])

Pond to 25% Redo 5,5. (Repair)

Number of trenches [3] Septic Tank Size ____ 1 000 gallons Pump Tank Size _____ gallons Trenches shall be installed on contour at a Maximum Trench Depth of: ______ 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 __ inches below pipe NA inches above pipe Conditions: On Content D-Box Equal Distribution 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: Comment Counties Date: 04 13 2018 ANDREW CURAN Construction Authorization Expiration Date: 04/13/2023

Harnett County Department of Public Health Site Sketch

	PROPERTY LOCATON:	9651 NC 4	2
ISSUED TO: Triangle Home Pros	LLC SUBDIVISION		LOT #
Authorized State Agents		KHS Daw COUL	13/2018
	ver corre	Date:	107
Authorized State Agent: AND SHET Equal Distribution Required Existing Septic Tank will be abandoned / crushed by septic installer after. SFD demoid 2° EXISTING SEPTICE ANEX	EXT SED 301	PUMP TO 25% PUMP TO 25% PEDUCTION REPAIR PROPOSED 17'X 48' 2BR SFD 30'	13/2018
	E	[!	

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

IOI OIL SILE WAS EWAI ER SISIEM		
Owner: Color Applicant: Trionsle Home Ros., LLC Address: 9051 Hus 42 Date Evaluated: 04 12/2018 Proposed Facility: 2007 Design Flow (1949): 240 CPT		
Address: 9651 Has 43 Date Evaluated: 07 1970		
Address: 9651 H. 35 42 Date Evaluated: 94 Proposed Facility: Design Flow (.1949): 346 CP Decation of Site: Property Recorded: 465	Property Size:	1.71xc
Location of Site: Property Recorded: 483	• •	
Water Supply: Public ☐ Individual ☐ Well	Spring	Other
Evaluation Method: Auger Boring Pit Cut		4
Type of Wastewater: Sewage Industrial Process	☐ Mixed	

P R O F I	.1940			DRPHOLOGY 1941		OTHER PROFILE FACTOR	.s		
E Position	Landscape Position/ Slope %	osition/ Depth	.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	L 2-4%	0-8	CR 32	VA 411 1/2 A 31 1/2 H 51 1/2					
		8-20	BK SCL	FA 5156					PS
		20-43	Br C	El 51 /2		48			0.3
3	L 2-4%	0-8	GR 5L	12 4 Bg					P5
		8-42	BK SLL	FA 51 1/2		#2	40.01		0.35
							12302		
			-		-				
		200		8					

Description	Initial	Repair System	Other Factors (.1946):
	System		Site Classification (.1948):
Available Space (.1945)			Evaluated By:
System Type(s)	25% red	25% rue	Others Present:
Site LTAR	0.3	3	Service and American Charles And American