

Harnett County Department of Public Health Improvement Permit

A building permit cannot be issued with only an Improvement Permit

PROPERTY LOCATION: 521 River Road (SR 1418)
 SUBDIVISION _____ LOT # TR1A

ISSUED TO: Steve Ennis
 NEW REPAIR EXPANSION
 Type of Structure: 2-Bathroom for Wedding Venue
 Proposed Wastewater System Type: 25% Reduction Sys.
 Projected Daily Flow: 500 GPD
 Number of bedrooms: NA Number of Occupants: NA 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 NA feet
 Permit valid for: Five years No expiration
 Permit conditions: _____

Authorized State Agent: [Signature] Date: 02/05/2021 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: Steve Ennis PROPERTY LOCATION: 521 River Road (SR 1418)
 SUBDIVISION _____ LOT # TR1A

Facility Type: 2-Bathroom for Wedding New Expansion Repair
 Basement? Yes No Basement Fixtures? Yes No
 Type of Wastewater System** 25% Reduction System (Initial) Wastewater Flow: 500 GPD
 (See note below, if applicable
25% Reduction System (Repair)

Installation Requirements/Conditions
 Number of trenches 6
 Septic Tank Size 1000 gallons Exact length of each trench 60 feet Trench Spacing: 9 Feet on Center
 Pump Tank Size 1000 gallons Trenches shall be installed on contour at a Soil Cover: 12 inches
 Maximum Trench Depth of: 24 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
NA inches above pipe
 Conditions: See Site Plan 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: 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: 02/05/2021
ANDREW CURRIE Construction Authorization Expiration Date: 02/05/2026

Harnett County Department of Public Health Site Sketch

Property Location: 521 River Road (SR 1418)

Issued To: Steve Ennis

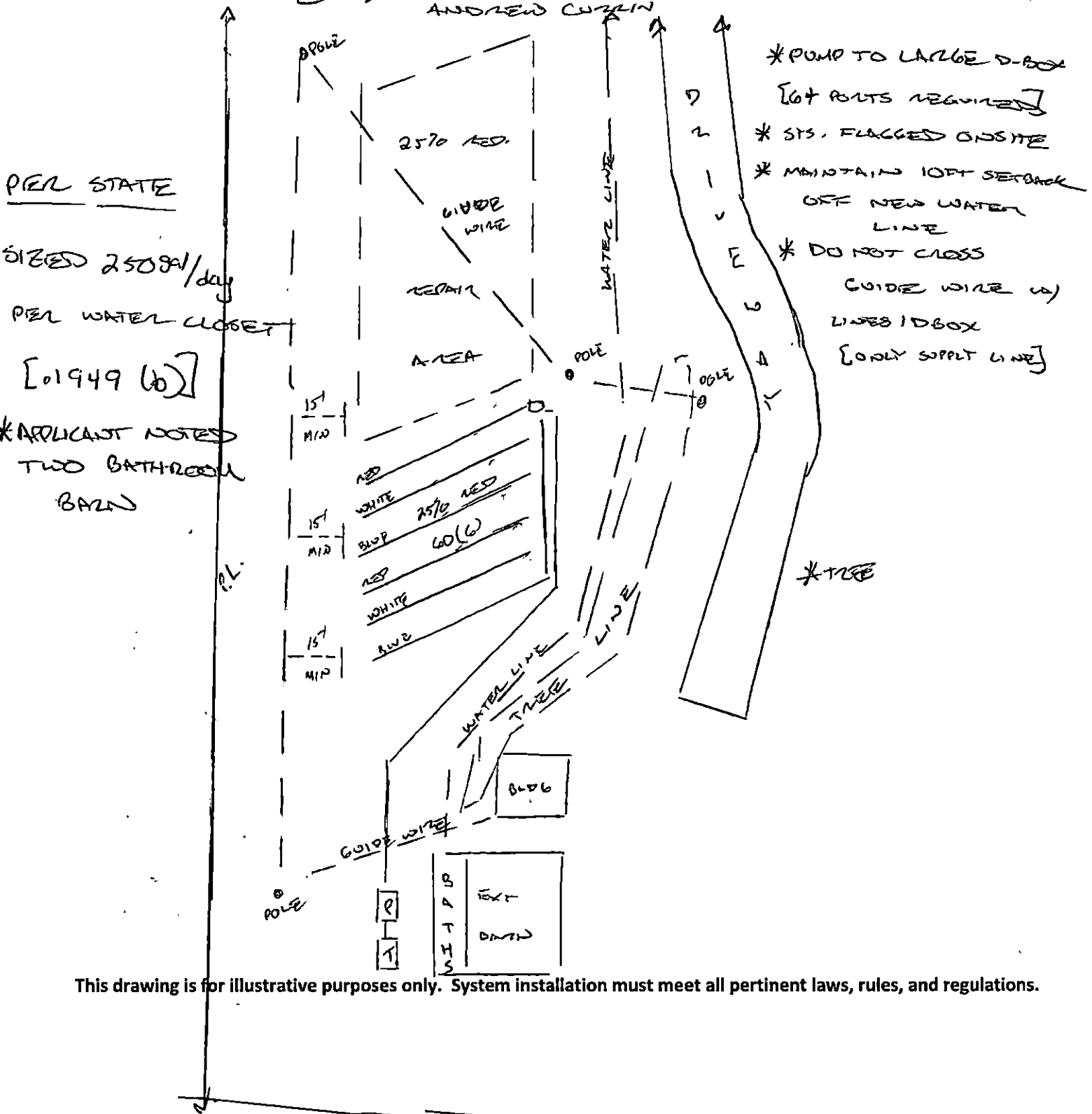
Subdivision

Lot # TR1A

Authorized State Agent:

[Signature]
ANDREW CURLIN

Date: 02/05/2009



- * PUMP TO LARGE D-BOX
- [6+ POLES REQUIRED]
- * SYS. FLAGGED ON-SITE
- * MAINTAIN 10FT SETBACK OFF NEW WATER LINE
- * DO NOT CROSS GUIDE WIRE w/ LINES / D-BOX [ONLY SUPPLY LINE]

This drawing is for illustrative purposes only. System installation must meet all pertinent laws, rules, and regulations.

Wedding Venues Design Daily Flowrate Determination

In response to the inquiry regarding design daily flowrate determination for wedding venues, below is a list of preliminary questions that need to be addressed by the applicant.

1. What is the actual or projected fire marshal's final maximum occupancy of the facility?
2. Are floor plans provided that identify seating areas and food preparation/serving/washing area details as well as include plumbing plans with all drains and water use fixtures identified, fixture specifications, and other amenities available/offered at the facility?
3. What type of food and beverage service will be offered/available? Single service, full service, or both? *SELF SERVED / SUPPLIED BY CATERER ON WEDDING PARTY*
4. Will there be food prepared on site, off site, or both? *OFF SITE BROUGHT IN BY CATERER*
5. What types of food-associated cleanup will be done on site (e.g., glassware, dishes, flatware, utensil, containers, pots, pans, linens, etc.)? *OFF SITE MOST SOME RINSING OF UTENSILS*
6. Will there be beverage-associated apparatus (e.g., wet bars, coolers, ice bins or machines, sinks, etc.) that will be directed to discharge to the subsurface wastewater system? *1 ICE MACHINE*
7. Will alcohol be served? If so, how will waste beverages be disposed? *PARTY CAN BRING OWN*
8. What is the maximum number of hours for a single event? *10*
9. What will be the days and times of operation? *FRI - SUN DEPENDING ON IF EVENTS ARE SCHEDULED*
10. What is the maximum number of events that can occur in a single day? What is the maximum number of events projected to be hosted in a seven-day period? *1 PER DAY 2 MAX PER 7 DAYS*
11. What is the maximum number of employees per event and per day?

Applicant Signature: *John H. Hill*

Date: 02-01-2021

The applicant or applicant's consultant specifies the design daily flow and submits it to the Local Health Department (LHD), and if required or if otherwise requested to OSWP, for confirmation in accordance with 15A NCAC 18A .1949. This includes the applicant's request and justification or design basis for an adjusted design daily flow for facilities discharging only domestic-strength wastewater in accordance with 15A NCAC 18A .1949(c) or Session Laws 2013-413 and 2014-120. Documentation is to include available flow data from similar facilities, water-using fixture capacities, occupancy and operation patterns, and other measured data [15A NCAC 18A .1949(b) and (c)].

Harnett County Health Department
910.893.7547