

Harnett County Environmental Health

File/Permit Number: EH2401-0023

CONSTRUCTION AUTHORIZATION

County: Harnett PIN/Lot Identifier: 9563-27-3931.000
Owner: Landon Splitter Applicant: Landon Splitter
Property Location: 903 Flynn McPherson Rd (SR 1109)
Facility Type: 3Br House

Number of bedrooms: 3 Number of Occupants: 6 Other: _____
 New Expansion Repair System Relocation Change of Use
Basement? Yes No Basement Fixtures? Yes No
Crawl Space? Yes No Slab Foundation? Yes No
Type of Wastewater System* _____ (Initial) Tank replacement only (Repair)

*Please include system classification for proposed wastewater system types in accordance with Rule .1301 Table XXXII

Design Daily Flow: 360 GPD Wastewater Strength: Domestic High Strength Industrial Process Wastewater
Rule .0403(e) Engineering Design Utilizing Low-flow Fixtures and Low-flow Technologies (S.L. 2013-413 and 2014-120)? Yes No
(if yes, please provide engineering documentation)

Effluent Standard: DSE HSE NSF/ANSI 40 TS-I TS-II RCW

Type of Water Supply: Private well Public well Shared well Municipal Supply Spring Other: _____

Installation Requirements/Conditions

Septic Tank Size: 1000 gallons Total Trench/Bed Length: _____ feet Trench/Bed Spacing: _____ feet on center
Trench/Bed Width: _____ inches LTAR: _____ gpd/ft² Usable Depth to LC (Initial)*: _____ ²Limiting condition
Soil Cover: _____ inches Slope Corrected Maximum Trench/Bed Depth[†]: _____ inches [†] Measured on the downhill side of the trench
Pump Tank Size (if applicable): _____ gallons Requires more than one pump? Yes No
Pump Requirements: _____ ft. TDH vs. _____ GPM Grease Trap Size (if applicable): _____ gallons
Distribution Method: Serial D-Box or Parallel Pressure Manifold(s) LPP Other: _____
Artificial Drainage Required: Yes No If yes, please specify details: _____

Legal Agreements (If the answer is "Yes" to any type of legal agreements, please attach a copy of the agreement.)

Multi-party Agreement Required [Rule .0204(g)]: Yes No
Easement, Right-of-Way, or Encroachment Agreement Required [Rule .0204(d)]: Yes No
Declaration of Restrictive Covenants: Yes No Pre-Construction Conference Required: Yes No
Management Entity Required: Yes No Minimum O&M Requirements: _____

Conditions: Replace Septic Tank only + reconnect to Existing drain lines

The requirements of 15A NCAC 18E are incorporated by reference into this permit and shall be met. Systems shall be installed in accordance with the attached site sketch. ***This Construction Authorization is subject to revocation if the site plan, plat, or the intended use changes.*** The Construction Authorization shall not be affected by a change in ownership of the site. This Construction Authorization is subject to compliance with the provisions of 15A NCAC 18E, or 15A NCAC 18A .1900, as applicable, and to the conditions of this permit.

Authorized Agent's Printed Name: Mark Osborne REHS Expiration Date: 01-26-29
Authorized Agent's Signature: [Signature] REHS Date: 01-26-24

See attached site sketch

Harnett County Environmental Health

SITE SKETCH

PIN 9563-27-3931.000

Permit Number EH2401-0023

Landon Splitter

Applicant's Name

Subdivision/Section/Lot Number

01-26-24

Authorized State Agent

Date

System components represent approximate contours only. The contractor must flag the system prior to beginning the installation to ensure that the proper grade is maintained.

Scale = NTS

