

HARNETT COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SECTION
307 W. CORNELIUS HARNETT BLVD.
LILLINGTON, NC 27546
910-893-7547 PHONE
910-893-9371 FAX

Application for Repair

EMAIL ADDRESS: Eichvalds2488@gmail.com

OWNER NAME Robert and Rosita Eichvalds

PHONE 919-428-8584

PHYSICAL ADDRESS 90 Fairfax Dr Sanford NC, 27332

MAILING ADDRESS (IF DIFFERENT THAN PHYSICAL) _____

IF RENTING, LEASING, ETC., LIST PROPERTY OWNER NAME _____

Pittman Crossing

SUBDIVISION NAME LOT #/TRACT # STATE RD/HWY SIZE OF LOT/TRACT

Type of Dwelling: Modular Mobile Home Stick built Other _____

Number of bedrooms 3 Basement

Garage: Yes No Dishwasher: Yes No Garbage Disposal: Yes No

Water Supply: Private Well Community System County

Directions from Lillington to your site: Rt 27 west to right turn on Barbeque Church Rd, After firehouse turn right on Rosser Pittman Rd. Left onto Fairfax Dr. 90 Fairfax drive is on right

In order for Environmental Health to help you with your repair, you will need to comply by completing the following:

1. A **"surveyed and recorded map"** and **"deed to your property"** must be attached to this application. Please inform us of any wells on the property by showing on your survey map.
2. The outlet end of the tank and the distribution box will need to be uncovered and property lines flagged. After the tank is uncovered, property lines flagged, underground utilities marked, and the orange sign has been placed, you will need to call us at 910-893-7547 to confirm that your site is ready for evaluation.

Your system must be repaired within 30 days of issuance of the Improvement Permit or the time set within receipt of a violation letter. (Whichever is applicable.)

By signing below, I certify that all of the above information is correct to the best of my knowledge. False information will result in the denial of the permit. The permit is subject to revocation if the site plan, intended use, or ownership changes.

Robert Eichvalds



Rosita Eichvalds



8/10/2024

Owner Signature

Date

HOMEOWNER INTERVIEW FORM

It is important that you answer the following questions for our inspectors. Please do not leave any blanks if possible, and answer all questions to the best of your ability. Thank You.

Have you received a violation letter for a failing system from our office? YES NO

Also, within the last 5 years have you completed an application for repair for this site? YES NO

Year home was built (or year of septic tank installation) 2012

Installer of system Terry Maples

Septic Tank Pumper Terry Maples Piedmont Pumping (most recent)

Designer of System Harnett County

1. Number of people who live in house? 5 # adults # children # total
2. What is your average estimated daily water usage? 4000 gallons/month or day county water. If HCPU please give the name the bill is listed in

3. If you have a garbage disposal, how often is it used? daily weekly monthly
4. When was the septic tank last pumped? 8/08/24 How often do you have it pumped? 2 years or after heavy Rain
5. If you have a dishwasher, how often do you use it? daily every other day weekly
6. If you have a washing machine, how often do you use it? daily every other day weekly monthly
7. Do you have a water softener or treatment system? YES NO Where does it drain?

-
8. Do you use an "in tank" toilet bowl sanitizer? YES NO
9. Are you or any member in your household using long term prescription drugs, antibiotics or chemotherapy? YES NO If yes please list
10. Do you put household cleaning chemicals down the drain? YES NO If so, what kind?
Pinesol (rarely)
11. Have you put any chemicals (paints, thinners, etc.) down the drain? YES NO
12. Have you installed any water fixtures since your system has been installed? YES NO If yes, please list any additions including any spas, whirlpool, sinks, lavatories, bath/showers, toilets

13. Do you have an underground lawn watering system? YES NO
14. Has any work been done to your structure since the initial move into your home such as, a roof, gutter drains, basement foundation drains, landscaping, etc? If yes, please list new roof, french drains around perimeter, french drains for rear gutters
15. Are there any underground utilities on your lot? Please check all that apply:
 Power Phone Cable Gas Water

16. Describe what is happening when you are having problems with your septic system, and when was this first noticed?

When we have a rainy season, ground water reverses fro the septic field back into the tank

Leach field is highter evevation than tank with no pump

17. Do you notice the problem as being patterned or linked to a specific event (i.e., wash clothes, heavy rains, and household guests?) YES NO If Yes, please list Heavy or consistant rain

For Registration Kimberly S. Hargrove
Register of Deeds
Harnett County, NC
Electronically Recorded
2019 Oct 28 03:04 PM NC Rev Stamp: \$ 414.00
Book: 3750 Page: 274 - 276 Fee: \$ 26.00
Instrument Number: 2019015827

HARNETT COUNTY TAX ID #
039588 0003 11

10-28-2019 BY: SB

GENERAL WARRANTY DEED

REVENUE: \$414.00

PARCEL ID: 039588 0003 11

PREPARED BY: Hutchens Law Firm LLP, 35 Plantation Drive, Suite 200, Cameron, NC 28326
RETURN TO: Grantee, 90 Fairfax Drive File No.: CAM1289410
Sanford, NC 27332

This instrument prepared by: Cynthia Diamond, licensed North Carolina attorney. Delinquent taxes, if any, to be paid by the closing attorney to the county tax collector upon disbursement of closing proceeds.

Brief Legal Description: Lot 31, Pittman Crossing

TITLE NOT EXAMINED OR CERTIFIED BY PREPARER

NORTH CAROLINA

COUNTY OF HARNETT

THIS DEED made this 18 day of October, 2019, by and between

Ryan Luecken Austin and wife, Deborah Joy Austin, whose address is 1169 Academic Dr., Winston Salem, NC 27106, hereinafter called Grantor,

and

Rosita Eichvalds and Robert Eichvalds, whose address is 90 Fairfax Drive, Sanford, NC 27332, hereinafter called Grantee;

The designation Grantor and Grantee as used herein shall include said parties, their heirs, successors, and assigns, and shall include singular, plural, masculine, feminine or neuter as required by context.

WITNESSETH

That the Grantor, for a valuable consideration paid by the Grantee, the receipt of which is hereby acknowledged, has and by these presents does grant, bargain, sell and convey unto the Grantee in fee simple, all that certain lot or parcel of land situated in or near the City of Sanford, Harnett County, North Carolina and more particularly described as follows:

Being all of Lot No. 31, containing 0.61 acres, more or less, according to a survey entitled, "Survey for Final Plat for Pittman Crossing Phase 1", prepared by Larry Kyle Allen, PLS, dated 11-01-2010 and recorded at Plat Slide 2011-12, Harnett County Registry. Reference to said plat is hereby made for greater certainty of description.

The property hereinabove described was acquired by Grantor by instrument recorded in Book 3662, Page 284, Harnett County Registry, North Carolina.

TO HAVE AND TO HOLD the aforesaid lot or parcel of land and all privileges and appurtenances thereto belonging to the Grantee in fee simple.

And the Grantor covenants with the Grantee, that Grantor is seized of the premises in fee simple, has the right to convey the same in fee simple, that title is marketable and free and clear of all encumbrances, and that Grantor will warrant and defend the title against the lawful claims of all persons whomsoever except for the exceptions hereinafter stated.

Title to the property hereinabove described is subject to the following exceptions: Restrictive covenants, easements and rights of way as may appear of record in the aforesaid registry as well as current year ad valorem taxes.

IN WITNESS WHEREOF, the Grantor has hereunto set his hand and seal, or if corporate, has caused this instrument to be signed in the corporate name by its duly authorized officers and its seal to be hereunto affixed by authority of its Board of Directors.

The property herein is is not the principal residence of the Grantors.

Ryan Luecken Austin
Ryan Luecken Austin

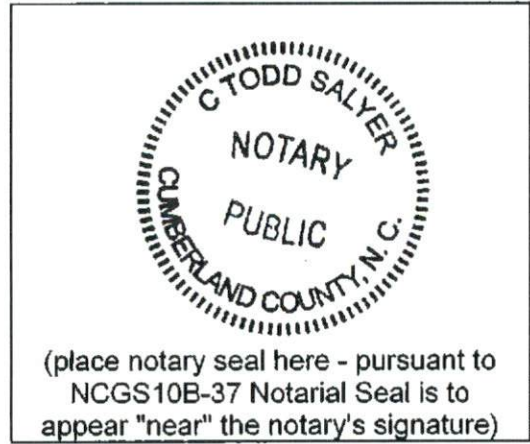
Deborah Joy Austin
Deborah Joy Austin

STATE OF NORTH CAROLINA
WARREN COUNTY

I certify that the following person(s) personally appeared before me this day, each acknowledging to me that he or she voluntarily signed the foregoing document for the purpose stated therein and in the capacity indicated:

Ryan Luecken Austin and Deborah Joy Austin

This the 18 day of October, 2019.



C. Todd Salyer
Notary C. TODD SALYER
Print Name
My Commission Expires: 9/25/22

NOTES:

1. ALL LOTS HAVE BEEN INVESTIGATED BY A LICENSED SOIL SCIENTIST
2. ALL LOTS HAVE PROPERTY LINES CUT AND FLAGGED
3. ALL LOTS HAVE BEEN SURVEYED BY A LICENSED SURVEYOR
4. THIS DEVELOPMENT IS WITHIN THE HILLS OF A VOLUNTARY AGRICULTURAL DISTRICT
5. THERE WILL BE A PROPERTY OWNERS ASSOCIATION
6. THERE WILL BE A PROPERTY OWNERS ASSOCIATION
7. STREET LIGHTS SHALL BE SPACED NOT MORE THAN 100 FEET APART
8. FIRE HYDRANT BE FURTHER THAN 300 FEET FROM A LOT
9. ALL LOT LINES WILL HAVE A 10' BROWNAZE EASTWAY AND UTILITY EASEMENT ON EACH SIDE TOTALING 20 FEET
10. LOT 81 AND LOT 82 WITHIN THE 30' BROWNAZE EASTWAY WILL ALSO HAVE A ENTRY SIGN EASEMENT ALONG THE PLACEMENT AND MAINTENANCE OF AN ENTRY SIGN THIS ENTRY SIGN WILL BE MAINTAINED BY THE PROPERTY OWNER OF THE LOT
11. THE RIGHT OF WAY OF VAY OF ROSSIE PITTMAN ROAD AND FAIRFAX DRIVE.

I HEREBY CERTIFY THAT THE DEVELOPMENT HEREON HAS BEEN DRAWN AND APPROVED BY THE HARRIETT COUNTY DEVELOPMENT REVIEW BOARD AND THAT THE DEVELOPMENT IS IN ACCORDANCE WITH THE HARRIETT COUNTY ZONING ORDINANCES AND THE HARRIETT COUNTY HEALTH, FIRE, MARSHAL, PLANNING AND PUBLIC UTILITIES DEPARTMENT. I AM SUBJECT TO RECALL AND TO THE REVOCATION OF THIS CERTIFICATE OF APPROVAL AT ANY TIME WITHIN THE PERIOD OF THIS CERTIFICATE.

DATE: 1/21/11

I HEREBY CERTIFY THAT THE DEVELOPMENT HEREON HAS BEEN DRAWN AND APPROVED BY THE HARRIETT COUNTY DEVELOPMENT REVIEW BOARD AND THAT THE DEVELOPMENT IS IN ACCORDANCE WITH THE HARRIETT COUNTY ZONING ORDINANCES AND THE HARRIETT COUNTY HEALTH, FIRE, MARSHAL, PLANNING AND PUBLIC UTILITIES DEPARTMENT. I AM SUBJECT TO RECALL AND TO THE REVOCATION OF THIS CERTIFICATE OF APPROVAL AT ANY TIME WITHIN THE PERIOD OF THIS CERTIFICATE.

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DATE: 1/21/11

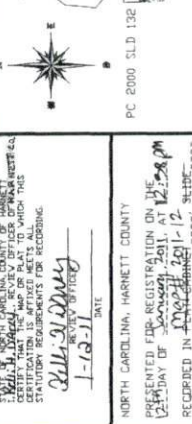
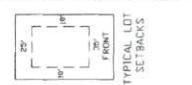
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DATE: 1/21/11

I HEREBY CERTIFY THAT THIS PLAT WAS DRAWN UNDER MY SUPERVISION FROM AN ACTUAL SURVEY MADE UNDER MY SUPERVISION THAT THE BOUNDARIES SHOWN ARE CORRECT AND ACCURATE TO THE BEST OF MY KNOWLEDGE AND BELIEF. I AM NOT PROVIDING ANY WARRANTY OR GUARANTEE THAT THIS PLAT IS A TRUE AND ACCURATE REPRESENTATION OF THE ACTUAL SURVEY. I AM NOT PROVIDING ANY WARRANTY OR GUARANTEE THAT THE INFORMATION AVAILABLE TO ME WAS COMPLETE AND ACCURATE. I AM NOT PROVIDING ANY WARRANTY OR GUARANTEE THAT THE INFORMATION AVAILABLE TO ME WAS COMPLETE AND ACCURATE.

DATE: 1/21/11

I HEREBY CERTIFY THAT THIS PROPERTY LIES WITHIN A SPECIAL FLOOD HAZARD AREA DESIGNATED BY FIRM FLOOD INSURANCE RATE POLICY MAP # 3709980001 EFFECTIVE DATE OCTOBER 3, 2006



OWNER/DEVELOPER
 JOHN COOPER
 2505 DALYMPLE STREET
 SANFORD, NC 27330
 919-777-0820

REGISTERED PROFESSIONAL SURVEYOR
 LARRY K. ALLEN
 1800-HEAR-FLOOD-ZONE

DATE: Jan. 19, 2011

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 1800-HEAR-FLOOD-ZONE

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 LARRY K. ALLEN
 1800-HEAR-FLOOD-ZONE

DATE: Jan. 19, 2011

SURVEY FOR: FINAL PLAT FOR PITTMAN CROSSING PHASE 1

11 LOTS

DATE: NOVEMBER 1, 2010

SCALE: 1" = 100'

PARCEL # 9588-53-8402-00

TOWNSHIP: BARBECUE

COUNTY: HARRIETT

STATE: NORTH CAROLINA

DATE: NOVEMBER 1, 2010

SCALE: 1" = 100'

PARCEL # 9588-53-8402-00

SITE DATA

TOTAL ACREAGE IN SITE	6.74 ACRES
NUMBER OF LOTS	11
SMALLEST LOT SIZE	0.46 ACRES
AVERAGE LOT SIZE	0.54 ACRES
ZONING	PA-20P
SEWAGE	SEPTIC TANKS
WATER	COUNTY WATER
LINEAR FEET OF STREETS	810'
MINIMUM FRONTAGE	100'
RIGHT OF WAY	50'

CURVE TABLE

NUMBER	DIRECTION	RAD. "	CHORD
C1	N 50°18'39" W	2500	34.04
C2	S 85°10'48" E	225.00	62.97
C3	S 82°58'36" E	175.00	62.26
C4	N 39°41'21" E	2500	36.62



2811000582

HTE# 11-5-26060R

Harnett County Department of Public Health

PERMIT # 26331

Operation Permit

22389

New Installation Septic Tank Nitrification Line Repair Expansion

PROPERTY LOCATION: Rosser Pittman Rd

Name: (owner) Southeastern Properties SUBDIVISION Pittman Crossing LOT # 21

System Installer: Terry Maples Registration # _____

Basement with plumbing: Garage Number of Bedrooms 3

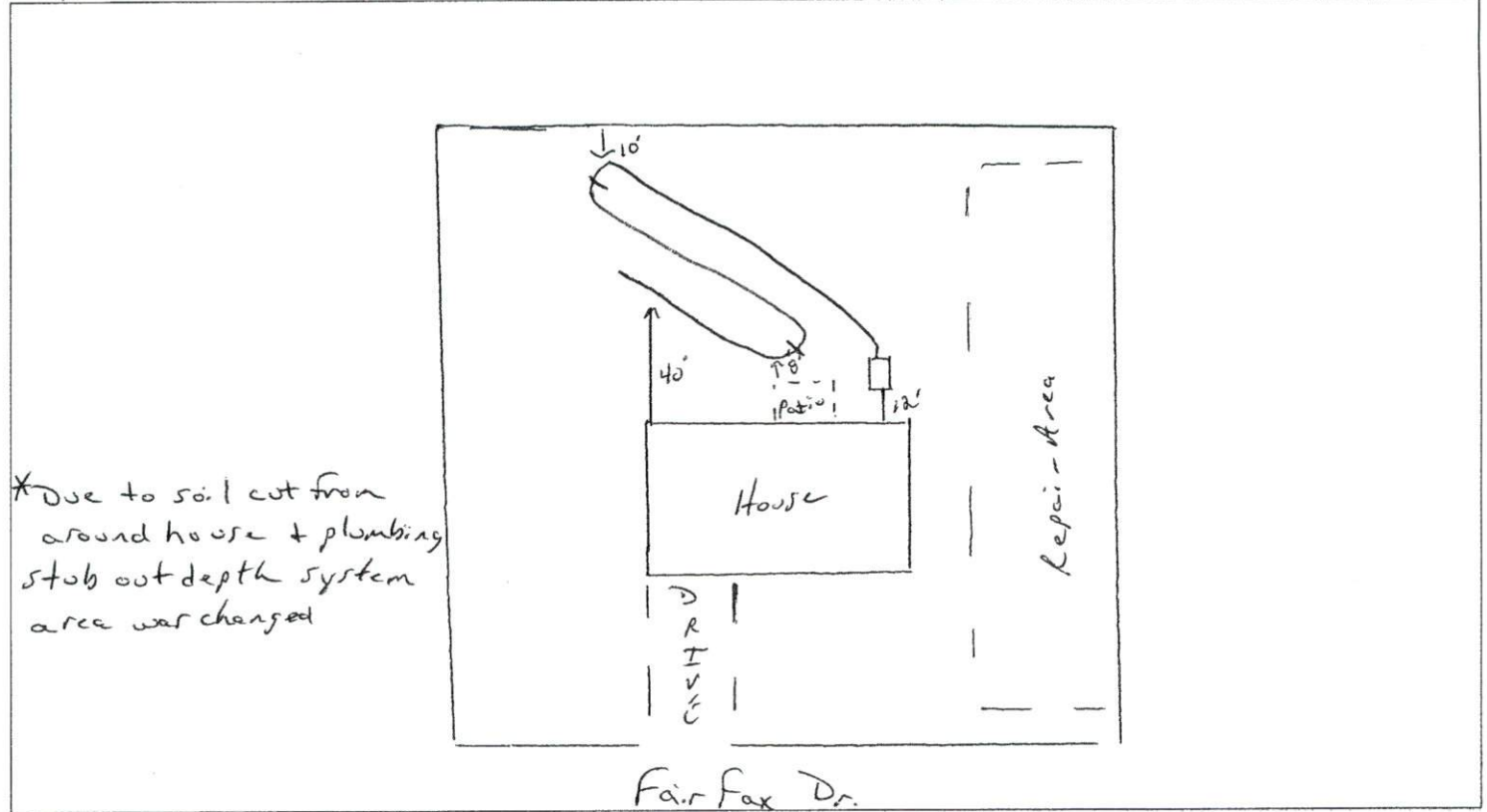
Type of Water Supply: Community Public Well Distance from well _____ feet

System Type: III G Types V and VI Systems expire in 5 years.

(In accordance with Table V a)

Owner must contact Health Department 6 months prior to expiration for permit renewal.

This system has been installed in compliance with applicable North Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.



PERMIT CONDITIONS:

- I. Performance: System shall perform in accordance with Rule .1961.
- II. Monitoring: As required by Rule .1961.
- III. Maintenance: As required by Rule .1961. Other: _____
Subsurface system operator required? Yes No
If yes, see attached sheet for additional operation conditions, maintenance and reporting.
- IV. Operation: _____
- V. Other: _____

D-Box Pump Alarm H2O Line PWR Line

Following are the specifications for the sewage disposal system on the above captioned property.

Type of system: Conventional Other Quick 4 Chamber Septic Tank: 1000 gallons Pump Tank: _____ gallons

Subsurface Drainage Field: No. of ditches 1 exact length of each ditch 240 feet width of ditches 3 feet depth of ditches 36-24 inches

French Drain Required: _____ Linear feet

Authorized State Agent Bryan McSwain RCHS Date 10/11/2012

HTE# 11-5-26060 R

Harnett County Department of Public Health Improvement Permit

26331

A building permit cannot be issued with only an Improvement Permit

ISSUED TO: Southeastern Properties PROPERTY LOCATION: Rosser Pittman Rd.
 NEW REPAIR EXPANSION SUBDIVISION: Pittman Crossing LOT # 31
 Type of Structure: SFD 40x30' 56x30' Site Improvements required prior to Construction Authorization Issuance:
 Proposed Wastewater System Type: 25% Reduction System
 Projected Daily Flow: 360 GPD
 Number of bedrooms: 3 Number of Occupants: 6 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 _____ feet Permit valid for: Five years
 Permit conditions: _____ No expiration

Authorized State Agent: Bryan McJannet, RPH Date: 3/15/2011 ^{BM} 6/28/2012 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: Southeastern Properties PROPERTY LOCATION: Rosser Pittman Rd.
 Facility Type: SFD New Expansion Repair SUBDIVISION: Pittman Crossing LOT # 31
 Basement? Yes No Basement Fixtures? Yes No
 Type of Wastewater System** 25% Reduction System (Initial) Wastewater Flow: 360 GPD
 (See note below, if applicable 25% Reduction System (Repair))

Installation Requirements/Conditions

Septic Tank Size <u>1000</u> gallons	Number of trenches <u>2</u>	Trench Spacing: <u>9</u> Feet on Center
Pump Tank Size _____ gallons	Exact length of each trench <u>120</u> feet	Soil Cover: <u>6-18</u> inches
	Trenches shall be installed on contour at a Maximum Trench Depth of: <u>18-30</u> inches	(Maximum soil cover shall not exceed 36" above the trench bottom)
	(Trench bottoms shall be level to +/- 1/4" in all directions)	
Pump Requirements: _____ ft. TDH vs. _____ GPM		Aggregate Depth: _____ inches below pipe
Conditions: _____		_____ inches above pipe
		_____ 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: Bryan McJannet, RPH Date: 3/15/2011 ^{BM} 6/28/2012
 Construction Authorization Expiration Date: 3/15/2016 6/28/2017

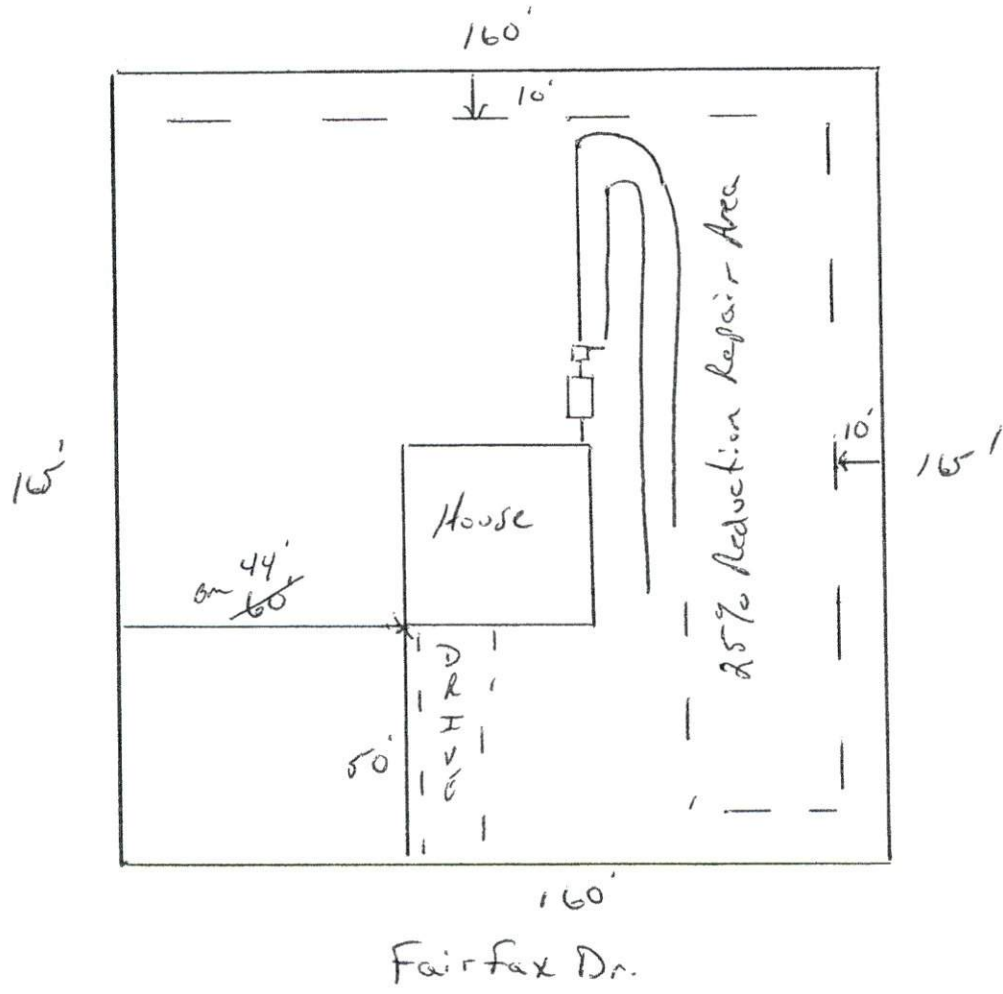
HTE# 11-5-26060 R

Permit # 26331

Harnett County Department of Public Health Site Sketch

ISSUED TO: Southeastern Properties PROPERTY LOCATOR: Rosser Pittman Rd
SUBDIVISION: Pittman Crossing LOT # 31

Authorized State Agent: [Signature] Date: 3/15/2011 6/28/2012



Harnett County Department of Public Health Improvement Permit

A building permit cannot be issued with only an Improvement Permit

ISSUED TO: Rosita Eichvalds PROPERTY LOCATION: 90 Fairfax Dr, Sanford
 SUBDIVISION Pittman Crossing LOT # 31
 NEW REPAIR EXPANSION Site Improvements required prior to Construction Authorization Issuance:
 Type of Structure: Existing SFD
 Proposed Wastewater System Type: Pump 25% Reduction
 Projected Daily Flow: 360 GPD
 Number of bedrooms: 3 Number of Occupants: 6 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 _____ feet Permit valid for: Five years
 Permit conditions: _____ No expiration

Authorized State Agent: *[Signature]* Date: 6/9/2020 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: Rosita Eichvalds PROPERTY LOCATION: 90 Fairfax Dr, Sanford
 SUBDIVISION Pittman Crossing LOT # 31
 Facility Type: Existing SFD New Expansion Repair
 Basement? Yes No Basement Fixtures? Yes No
 Type of Wastewater System** Pump to 25% Reduction (Initial) Wastewater Flow: 360 GPD
 (See note below, if applicable
25% Reduction (Repair)
 Installation Requirements/Conditions
 Septic Tank Size Exist gallons Exact length of each trench 200 feet Trench Spacing: 9 Feet on Center
 Pump Tank Size _____ gallons Trenches shall be installed on contour at a Soil Cover: 6 inches
 Maximum Trench Depth of: 18-24 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: _____ inches below pipe
 _____ inches above pipe
 Conditions: _____ 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: _____

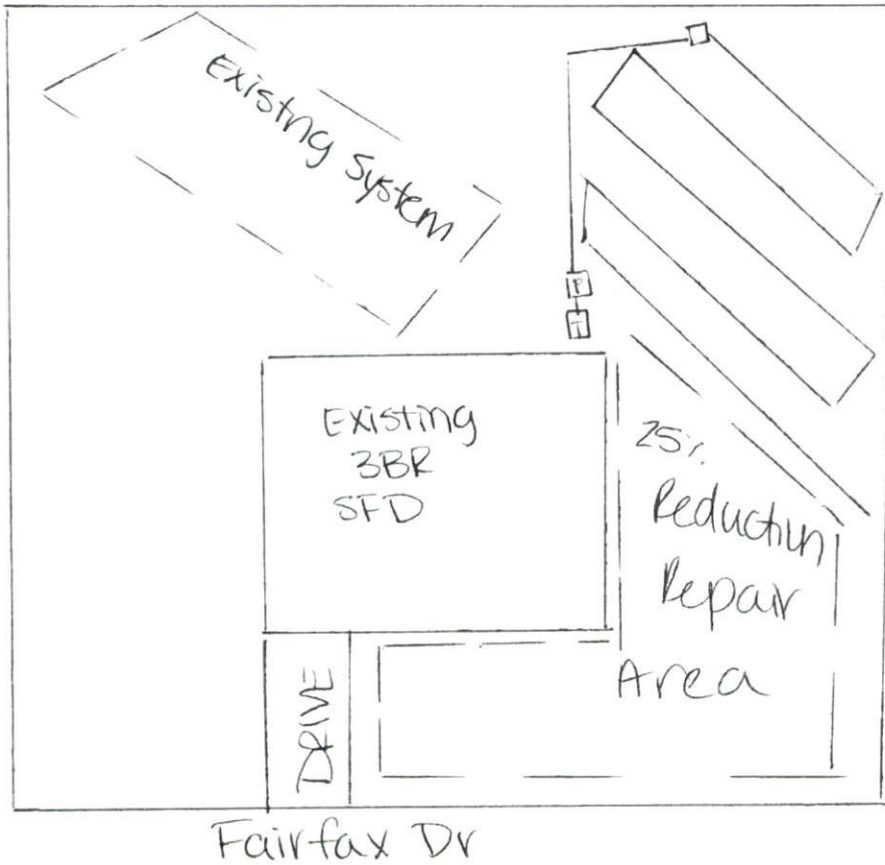
This Construction Authorization is subject to revocation if the site plan, plat, or the intended use changes. The Construction Authorization shall not be transferred when there is a change in ownership of the site. This Construction Authorization is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit. SEE ATTACHED SITE SKETCH

Authorized State Agent: *[Signature]* Date: 6/9/2020
 Construction Authorization Expiration Date: 7/24/2020

Application # EH2006-0005

Harnett County Department of Public Health Site Sketch

Property Location: 90 Fairfax Dr, Sanford
Issued To: Rosita Eichwalds Subdivision Pittman Crossing Lot # 31
Authorized State Agent: [Signature] REHS-I Date: 6/9/2020



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