HTE# 17-5-41216 Harnett County Department of Public Health

29475

Improvement Permit

A building permit cannot be issued with only an Improvement Permit ISSUED TO: Gary Peacott PROPERTY LOCATION: 3069 05 301 North SUBDIVISION ___ REPAIR

EXPANSION Type of Structure: 3BR SLOMH (70'x14') Site Improvements required prior to Construction Authorization Issuance: Proposed Wastewater System Type: 25% reduction Sys. Projected Daily Flow: 360 GPD Number of bedrooms: 3 Number of Occupants: ____ 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 100 feet Permit valid for: Five years ☐ No expiration Authorized State Agent:: Of Management Date: 05/09/17 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 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 ISSUED TO: Gary Peacock PROPERTY LOCATION: 3069 US 301 WORTH Facility Type: 3BR SWMH (70'x14') A New Expansion Repair Basement? Yes No Basement Fixtures? Yes No Type of Wastewater System** 25:0 reduction 5,5 tem (Initial) Wastewater Flow: 360 GPD (See note below, if applicable []) 25% reduction System (Repair) Installation Requirements/Conditions Number of trenches 3 Septic Tank Size 1000 gallons Exact length of each trench 80 feet Trench Spacing: 9 Feet on Center Trenches shall be installed on contour at a Soil Cover: 14 inches Pump Tank Size _____ gallons Maximum Trench Depth of: 26 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 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 Construction Authorization Expiration Date: 05/09/22

HTE#_17-5-41216

Permit # _____ 29475

Harnett County Department of Public Health Site Sketch

	- CONCION
ISSUED TO: Gary Peacock	PROPERTY LOCATON: 3069 US 301 North
Authorized State Agent:	
PROPIERTY LINE	TROY PARKER LP.
# PRIMARY 250' WELL . AREA	36R SWMIH SECONDANY WELL AREA TO'RYO! REPAIR AREA
#Installer shall meet onsite if system is marginally ajusted by final well setback	REPAIR ARIEN REPAIR ARIEN ROSSA RO
9023	TO 135 300 NORTH

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: Werren Applicant: Gas Remain Date Evaluated: 05/08/17

Proposed Facility: 350 SWAH

Location of Site:

Water Supply:

Date Evaluated: W/08/14

Design Flow (.1949): 360 GED

Property Recorded: 425

Property Size: 15 AC.

Water Supply: Public Individual Well Spring Other
Evaluation Method: Auger Boring Pit Cut
Type of Wastewater: Sewage Industrial Process Mixed

R O F I L	.1940 Landscape Position/ Slope %	pe Horizo	· L	IL MORPHOLOGY .1941	OTHER PROFILE FACTORS				
#		Depth		re/ Consistence	.1942 Soil Wetness/	.1943 Soil Depth (IN.)	.1956 Sapro Class	.1944 Restr	Profile Class
-	6 3%		7 0				Ciass	Horiz	& LTAR PS
		24-46	BK C	- FI 5 8 54p	7.54271.244"	46			6.4
	-								
2	L 3%	, 0-12	Q 5;	L FA SPSAP					02
		12-24	Be c	L = SA SA					P3
-		24-48	1	L AL 5 859		48			0.4
					1 1 1 N1/	12			
3	L 3%	0-16	GR 5:1	FR 5 8 56			*		PS
		16-44	BK CL	FI 39 36	7.54.27, Q42"	44	0		0.4
.									
L	L 4%	0-12	GA SIL	FA S 8540					PS
+		17-46	BK SL	FI 5 8560	7.54271, @44"	46			0.4
+							E		
+					32				
\neg									

Description	Initial System	Repair System	Other Factors (.1946):				
Available Space (.1945) System Type(s)	75% Med		Site Classification (.1948): Evaluated By:	(-	-	//-	
Site LTAR	0.4	25% red.	Others Present:	Andrew	1. Cu	rin, r	16-145