## HTE# 17-5-43313 Harnett County Department of Public Health

Improvement Permit

A DUI	laing permit cannot be issued with only an improvemen		1126)
ISSUED TO: BEOXIMIN LO MURRAY	PROPERTY LOCATION: 1816 M. SUBDIVISION	ittles 14. Con 1	LOT # AA
NEW ☐ REPAIR ☐ EXPANSION	Site Improvements of	quired prior to Construction Authori	
Type of Structure: 430 GS1x281 STS		quired prior to construction Authori.	zation issuance:
Proposed Wastewater System Type: 25% neded			
Projected Daily Flow: 460 GPD	<del></del>		
Number of bedrooms: 4 Number of Occupants	: 8 max		
Basement  Yes  No	The state of the s		
Pump Required: ☐Yes ☐ No ☐ May be required	based on final location and elevations of facilities		
Type of Water Supply:   Community Public   Public	Well Distance from well feet	Permit valid for:	Five years
Permit conditions:			☐ No expiration
Authorized State Agent:			CHED SITE SKETCH
The issuance of this permit by the Health Department in no way guarantees site is subject to revocation if the site plan, plat, or the intended use change the Laws and Rules for Sewage Treatment and Disposal and to conditions of	es. The Improvement Permit shall not be affected by a change in own	ecking with appropriate governing bodies in a crising of the site. This permit is subject to c	meeting their requirements. This compliance with the provisions of
	Construction Authorization		
	(Required for Building Permit)		
The construction and installation requirements of Rules .1950, .1952, .1954, with the attached system layout.		into this permit and shall be met. Systems	shall be installed in accordance
ISSUED TO: Benjamin La murray	PROPERTY LOCATION: 1010	morthers ad	(50 1436) LOT # 2A
Facility Type: 430 GB x 38 5 5 Basement?	New 🗆 Expansion 🗆 Repair		LOT #
		/I-1211/ W	1100 000
(See note below, if applicable $\square$ )	iduction system	(Initial) wastewater flow: _	780 GPD
	(Di)		
Installation Dequirements/Conditions	umber of trenches 4 (Repair)		
Installation Requirements/Conditions N	imber of trenches	9	
	eact length of each trench 90 feet		
	enches shall be installed on contour at a		rches
	aximum Trench Depth of: inches	(Maximum soil cover shall no	
1		36" above the trench botto	om)
	all directions)		
Pump Requirements:ft. TDH vs G	PM		inches below pipe
		Aggregate Depth:	inches above pipe
Conditions:			inches total
WATER LINES (INCLUDING IRRIGATION) MUST BE 1	OFT. FROM ANY PART OF SEPTIC SYSTEM OR I	REPAIR AREA.	
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAI			
** If applicable: I understand the system type specified is	different from the type energified on the application	I account the energifications of th	12
**If applicable: I understand the system type specified is	interent from the type specified on the application	. I accept the specifications of th	is permit.
Owner/Legal Representative Signature:		Date:	
This Construction Authorization is subject to revocation if the site plan, plat, or Construction Authorization is subject to compliance with the provisions of the			nership of the site. This TTACHED SITE SKETCH
The provision of surject to compliance with the provisions of the	and notes for sewage freatment and visposal and to the condit	ons or this permit.	TIACHED SHE SKEICH
Authorized State Agent:	- And Andrews	10/03/2	
Authorized State Agent:		10/03/201	
ANDREW WIRIN	Construction Authorization Expiration D	ate: 10/03/2021	3

## Harnett County Department of Public Health Site Sketch

ISSUED TO: Benjamin Lo	Morray	PROPERTY LOCATON:SUBDIVISION	1810 Matthews		- N3C) OT # <u>aA</u>	-
Authorized State Agent:	na	Man,	Date:	16/03/20	517	_
	AN	marzo wa	ian			
4-			394'			
OVER	HEAD	POWER				
FUTURE FUTURE BACK 24'x 20	1	1 1 1			-	B
3d x 401 CARPORT	1	4) 5 × 5 × 5 × 5 × 5 × 5 × 5 × 5 × 5 × 5	PART	- 1		
	1	90 (4) 90 (4)		1	1001	wst.
	1	53 53	DECK DECK	1	SET BACK	
	14		PLUPOSED	34'x26'	5°6	
UNSUITAGLE	N	43/2	DWMH	Chapona	12	
501L3	130612					+
Note:	7					
* Three(3) 120 lines may be institute	2 2	PUMP	У ТО			
if overbend power setback is	7		EDUCTION			
maintained		REPAI	1 AREA			
* System may require meet install	1					
				1 /		
	The second secon	\				
DRIVE W	AY	\				
MATTHE	16					1
	22 UP	502 14	136			

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: Appl	icant: Ben MUr	(")		
Address: 1910 maffles	us Ad- Dat	e Evaluated: 10/02/2017		
Proposed Facility: 43n Location of Site:	Des Des	ign Flow (.1949): 480 CPD	Property Size: 3	3.71AC
Location of Site: 7372	Pro	perty Recorded: 195	100	
Water Supply:	Public	Individual Well	☐ Spring	Other
Evaluation Method:	Auger Boring	☐ Pit ☐ Cut		
Type of Wastewater:	Sewage	☐ Industrial Process	☐ Mixed	

P R O F I .1940			SOIL MORPHOLOGY		OTHER PROFILE FACTORS				
L E #	Landscape Position/ Slope %	Horizon Depth (ln.)	.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%	0-8	62 52	VER 5550 Kee			8		P3
		8-40	BK SU/C	En 31 1/49	7.54271@38"	401			0.35
3,4	L 3%	0-17	GR 9L	VF 5550 Wag					P5
		12-40	BA SUL	FA SPER	7.64CA, Q 36"	401			0.36
5	L 1%	0-12	68 50	VA HALLA					U
		12-18	Be sull	A SOKY	7.54271, @14"	181			_
*	Soil	con	sisterd	2 w/ 1	H. Owens,	L88 :	Soil (	Zepur	<b>C</b>
					,				
			31						

Initial	Repair System	Other Factors (.1946):	
System		Site Classification (.1948):	Positisionall's Svitable
25% Res	25% Lis	Others Present:	Andrew Currin, news
0.35	0.35		
	System 25% Acs	25% Mes 25% Les	System Site Classification (.1948):  Evaluated By:  Others Present: