

Harnett County Department of Public Health Improvement Permit

A building permit cannot be issued with only an Improvement Permit

ISSUED TO: KB Home Raleigh-Durham Inc. PROPERTY LOCATION: 20 White Quartz Pl. (Christian Light Rd. - SR 1412)
 SUBDIVISION Mason Pointe LOT # 50
 NEW REPAIR EXPANSION Site Improvements required prior to Construction Authorization Issuance: _____
 Type of Structure: 4-bedroom 50'x70' SFD
 Proposed Wastewater System Type: Pump to 25% Reduction System
 Projected Daily Flow: 480 GPD
 Number of bedrooms: 4 Number of Occupants: 8 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
 Permit conditions: _____ No expiration

Authorized State Agent: [Signature] Date: 05/24/2019 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: KB Home Raleigh-Durham Inc. PROPERTY LOCATION: 20 White Quartz Pl. (Christian Light Rd. - SR 1412)
 SUBDIVISION Mason Pointe LOT # 50
 Facility Type: 4-bedroom 50'x70' SFD New Expansion Repair
 Basement? Yes No Basement Fixtures? Yes No
 Type of Wastewater System** Pump to 25% Reduction System (Initial) Wastewater Flow: 480 GPD
 (See note below, if applicable)
Pump to 25% Reduction System (Repair)
Installation Requirements/Conditions
 Septic Tank Size 1000 gallons Exact length of each trench 75-90 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
 _____ 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: [Signature] Date: 05/24/2019
ANDREW CURRIE Construction Authorization Expiration Date: 05/24/2024

HTE# SFD 1904-0051

Permit # NA

Harnett County Department of Public Health Site Sketch

PROPERTY LOCATION: 20 White Quartz Pl.

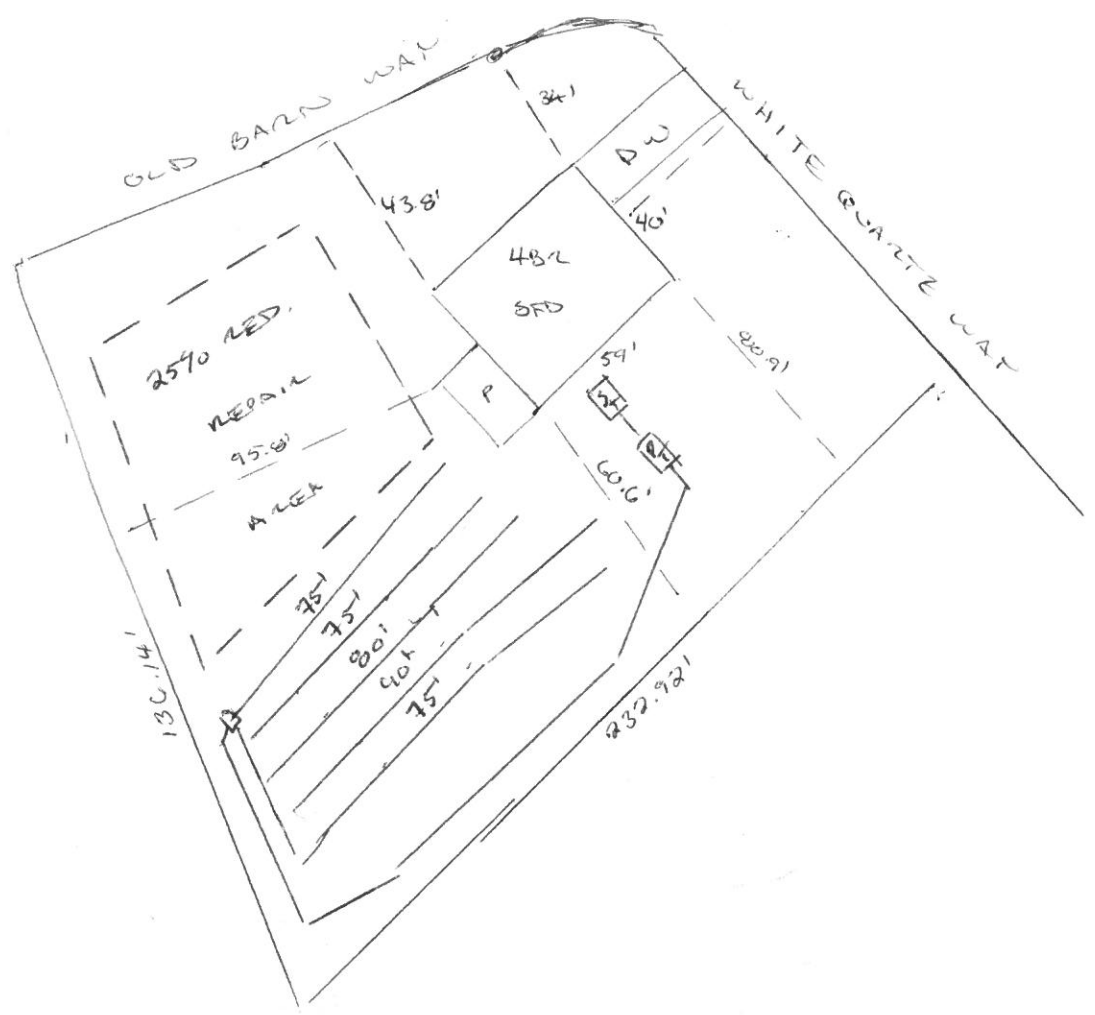
ISSUED TO: Butcher Civil Survey Co.

SUBDIVISION Mason Pointe

LOT # 50

Authorized State Agent: *Andrew Warren*
ANDREW WARREN

Date: 05/24/2019



**Masons Pointe S/D Lot 50
SYSTEM TAP CHART**

Bench Mark		is = 100.00 Location of BM				Elevation Head			2.30
Pump tank elev.		100.00	Pump elev.	94.60	Manifold elev.			96.90	
line	color	rod read	Elevation	length	hole size	flow/tap	gal/day	trench area	LINE LTAR
6	Yellow	4.10	95.90	75	1/2in SCH 40	7.11	88.55	225	0.3936
7	Pink	4.20	95.80	75	1/2in SCH 40	7.11	88.55	225	0.3936
8	Yellow	4.30	95.70	80	1/2in SCH 40	7.11	88.55	240	0.3690
9	Blue	4.50	95.50	90	3/4in SCH 80	10.1	125.79	270	0.4659
10	Pink	4.60	95.40	75	1/2in SCH 40	7.11	88.55	225	0.3936
		total	feet =	395	gal/min =	38.54	LTAR =		0.3500
							LTAR + %5		0.3675
% of Dose Vol.	75	Des. Flow		480	(ltar W/ INOV)		0.4667		
Dose Volume	192.56	Pump Run=		12.45	(ltar W/ INOV + 5%)		0.4900		
Dose Pump Time	5.00	Tank Gal/IN		19.65					
Drawdown in Inches	9.80								

**Masons Pointe S/D Lot 50
Repair TAP CHART**

Bench Mark		is = 100.00 Location of BM				Elevation Head			3.00
Pump tank elev.		100.00	Pump elev.	94.60	Manifold elev.			97.60	
line	color	rod read	Elevation	length	hole size	flow/tap	gal/day	trench area	LINE LTAR
1	Yellow	3.40	96.60	70	1/2in SCH 40	7.11	96.73	210	0.4606
2	Purple	3.50	96.50	55	1/2in SCH 80	5.48	74.56	165	0.4519
3	Orange	3.60	96.40	75	1/2in SCH 40	7.11	96.73	225	0.4299
4	Blue	3.80	96.20	95	3/4in SCH 80	10.1	137.41	285	0.4822
5	Orange	4.00	96.00	65	1/2in SCH 80	5.48	74.56	195	0.3823
		total	feet =	360	gal/min =	35.28	LTAR =		0.3500
							LTAR + %5		0.3675
% of Dose Vol.	75	Des. Flow		480	(ltar W/ INOV)		0.4667		
Dose Volume	175.50	Pump Run=		13.61	(ltar W/ INOV + 5%)		0.4900		
Dose Pump Time	4.97	Tank Gal/IN		19.65					
Drawdown in Inches	8.93								