Harnett County Environmental Health

NOTICE OF INTENT TO REVOKE IMPROVEMENT PERMIT/CONSTRUCTION AUTHORIZATION (specify)

3-21-24 (Date)

Owner: John G St. PRTR- Street Address: 1242 Cool Springs Rd (SR 1265) City/Zip Code: Lillington, NC 27546
Street Address: 1242 Cool Springs Rd (SR 1265)
City/Zip Code: Lillingran, NC 27546
Subject: Notice of Intent to Revoke $\frac{SFD2105-0003}{(specify name/location)}$ Improvement Permit/Construction Authorization (specify)
Dear John G. ST. Pete : Owner or Owner's Representative :
The HomeT Guary health department inspected the site for the on-site wastewater system
for compliance with General Statues 130A-334 to 345, 15A
NCAC 18E, and Improvement Permit/Construction Authorization FPAC/SFD 2105-0003 conditions. Permit Type and Number
As a result of this inspection, the Department has determined the following violations:
Violation(s) Law or Rule Citation(s)
Site Altered and No longer Usable 15A NCAC 18E, 0204 (K) (Z)

This is to notify you that based on these violations, the Department intends to revoke your Improvement Permit/Construction Authorization (specify) 30 days from the date of this notice.

If the Health Department determines that all the violations have been corrected before 30 days expire, the revocation will not go into effect. If the corrections are not made before 30 days and the permit is revoked, you must apply for a new Improvement Permit/Construction Authorization (specify) and meet the requirements of the current laws and rules necessary to obtain a new Improvement Permit/Construction Authorization (specify).

You have a right to an informal review of this decision. You may request an informal review by the environmental health supervisor at the local health department. You may also request an informal review by the Department of Health and Human Services' Regional Soil Scientist. A request for informal review must be made in writing to the local health department.

You also have a right to a formal appeal of this decision. To pursue a formal appeal, you must file a petition for a contested case hearing with the Office of Administrative Hearings, 1711 New Hope Church Rd, Raleigh, NC 27609. You may write the Office of Administrative Hearings, call the office at 984-236-1850, or get a copy of the petition form from the OAH web site at http://www.oah.nc.gov. The petition for a contested case hearing must be filed in accordance with the provision of General Statutes 130A-24

and 150B-23 and all other applicable provisions of Chapter 150B. General Statute 130A-335(g) provides that your hearing will be held in the county where your property is located.

If you wish to pursue a formal appeal, you must file the petition form with the Office of Administrative Hearings **WITHIN 30 DAYS OF THE DATE OF THIS LETTER.** The date of this letter is **XXX XX, XXXX.** Meeting the 30-day deadline is critical to your formal appeal.

If you file a petition for a contested case hearing with the Office of Administrative Hearings, **you are required** by General Statute 150B-23 to serve a copy of your petition on the Registered Agent for the Department of Health and Human Services: Julie Cronin, Office of General Counsel, Department of Health and Human Services, 2001 Mail Service Center, Raleigh, N.C. 27699-2001.

Do not serve the petition on your local health department. Sending a copy of your petition to the local health department will not satisfy the legal requirement in General Statute 150B-23 that you send a copy to the Office of General Counsel, 2001 Mail Service Center, Department of Health and Human Services.

You may contact our office at 910-893-7547	(phone) or Mosborne @ (en	nail).
	horneTT. Org	
Sincerely,		
Mil anet	45	

(Signature of Authorized Agent

Harnett County Department of Public Health

Improvement Permit

A bulleting permit can	PROPERTY LOCATION: 1240 Cool springs Rd (SR1265)
ISSUED TO: John G. St. Peter	SUBDIVISIONLOT #
NEW REPAIR EXPANSION INTERPRETARY STORMS INTO THE REPAIR STORMS INTO	Site Improvements required prior to Construction Authorization Issuance:
Proposed Wastewater System Type: Pump to 25% reduction	
Projected Daily Flow: 480 GPD	
Number of bedrooms: 4 Number of Occupants: 8	_max
Basement Yes X No	
Pump Required: Yes □ No □ May be required based on final	location and elevations of facilities
Type of Water Supply: Community Public Well Dista	nce from well feet Permit valid for: 🔀 Five years 🔲 No expiration
Permit conditions:	— по схриалон
21	
Authorized State Agent:: Mah W REHS	Date: 06-15-21 SEE ATTACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guarantees the issuance of oth site is subject to revocation if the site plan, plat, or the intended use changes. The Improvemen	er permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This t 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.	
Count	
	ruction Authorization
	equired for Building Permit)
The construction and installation requirements of Rules 1930, 1932, 1939, 1933, 1936, 193 with the attached system layout.	7. 1958. and 1959 are incorporated by references into this permit and shall be met. Systems shall be installed in accordance
ISSUED TO: John G. St. Peter	PROPERTY LOCATION: 1240 Cool springs Rd (SR1265)
	SUBDIVISION LOT #
Facility Type: 112' x 27' SFD	
Basement? Yes No Basement Fixtures? Yes	⊠ No
Type of Wastewater System** Pump to 25% reduction	n (Initial) Wastewater Flow: 480 GPD
(See note below, if applicable)	
Pump to 25% reduction	
	ches 1
	each trench 300 feet Trench Spacing: 9 Feet on Center
The state of the s	be installed on contour at a Soil Cover: 6inches
	h Depth of: 18" - 24" inches (Maximum soil cover shall not exceed
N. Carlotte and Ca	s shall be level to +/-1/4" 36" above the trench bottom)
in all directions	5 10 10 10 10 10 10 10 10 10 10 10 10 10
Pump Requirements:ft. TDH vsGPM	inches below pipe
M cia be Face	Aggregate Depth:inches above pipe
Conditions: Meet on Site before	Septite Listallinches total
for Drain Une coyou	ANN DADE OF SERVICE CUSTOM OR DEPAID AREA
WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD AR	
**If applicable: 1 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 us	e 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	
11 11	-
Authorized State Agent: Male Che RETO	Date: <u>06-15-21</u>
Con	struction Authorization Expiration Date: 06-15-26

Harnett County Department of Public Health Site Sketch

Property Location: 1240 Cool springs Rd (SR12 Issued To: John G. St. Peter	Subdivision	Lot #
Authorized State Agent: Mah	AL REHS	Date: 06-15-21
Authorized State Agent.	wooded	
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Existing Bld9		
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Department of Environment, Health and Natural Resources Division of Environmental Health On-Site Wastewater Section

Sheet: Property ID: Lot #:

File #: Code:

SFD 2108-0003

SOIL/SITE EVALUATION

for ON-SITE WASTEWATER SYSTEM

Wher: St. Pert Applicant:
Address: 1240 (0015 pring red

Proposed Facility: SFD

Date Evaluated
Design Flow (...)

Date Evaluated: 6-11-21 Design Flow (.1949): 480 GPD

Property Size:

Location of Site: Water Supply: Public ☐ Individual Evaluation Method: ☐ Auger Boring ☐ F

Property Recorded:

□ Spring

Other

Sewage Type of Wastewater:

Pit Industrial Process ☐ Cut

☐ Mixed

P R O F I	.1940			RPHOLOGY 1941	P	OTHER ROFILE FACTO	RS		
L E #	Landscape Position/ Slope %	Horizon Depth (In.)	.1941 Structure/ Texture	.1941 Consistence Mineralogy	.1942 Soil Wetness/ Color	.1943 Soil Depth (IN.)	.1956 Sapro Class	.1944 Restr Horiz	Profile Class & LTAR
PIT	2	0-28	sci sok	Filsskelske	>60"	£28"	100%	_	Ps . 4
	5-7%	28-60	Seprolite	Filsskelske			≥28"		Group
PIT		0-21	sel SDG	Filsskelsse	>54"	521"	100%	_	P5.4
2	5-7%	21-54	SuproleTe	Filss/selsx		u C	221"	2 85	Group
Br 3	7	0-26	Sci SBk	F. lss lsekal	>54"	£ 26"	100%	_	U BC sup
3	5-78	26- L	Seprolite	Filss SPKxl) ·	≥ 26"		formation vertical
Pir	2	0-30	SCI SBk	F./ss/se/sxP	> 70"	≤ 30°	100%	_	PS.4
4	5-7%	30-60	Suprolite	F./ss/se/se	. e	***	≥ 30°		Group
7.5	2					The state of the s			
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escription	Initial System	Repair System
Available Space (.1945)	-	1
System Type(s)	252 rd	252 00
Site LTAR	.4	, 4

Other Factors (.1946): Site Classification (.1948): PS

Others Present:

Evaluated By: Marker REH

The state of the s

COMMENTS: ____

COMMENTS:					
17 to 2.					
LANDSCAPE POSITIONS	GROUP	TEXTURES	.1955 LTAR	CONSISTENCE MOIST	WET
R-RIDGE S-SHOULDER SLOPE L-LINEAR SLOPE FS-FOOT SLOPE N-NOSE SLOPE	11	S-SAND LS-LOAMY SAND SL-SANDY LOAM L-LOAM	0.8 - 0.6	VFR-VERY FRIABLE FR-FRIABLE FI-FIRM VFI-VERY FIRM	 NS-NON-STICKY SS-SLIGHTY STICKY S-STICKY VS-VERY STICKY
H-HEAD SLOPE CC-CONCLAVE SLOPE CV-CONVEX SLOPE T-TERRACE FP-FLOOD PLAN	III	SI-SILT SIL-SILT LOAM CL-CLAY LOAM SCL-SANDY CLAY LOAM	0.6 - 0.3	EFI-EXTREMELY FIRM	NP-NON-PLASTIC SP-SLIGHTLY STICKY P-PLASTIC VP-VERY PLASTIC

STRUCTURE
SG-SINGLE GRAIN
M- MASSIVE
CR-CRÜMB
GR-GRANULAR
SBK-SUBANGULAR BLOCKY
ABK-ANGULAR BLOCKY
PL-PLATY
PR-PRISMATIC

MINERALOGY SLIGHTLY EXPANSIVE

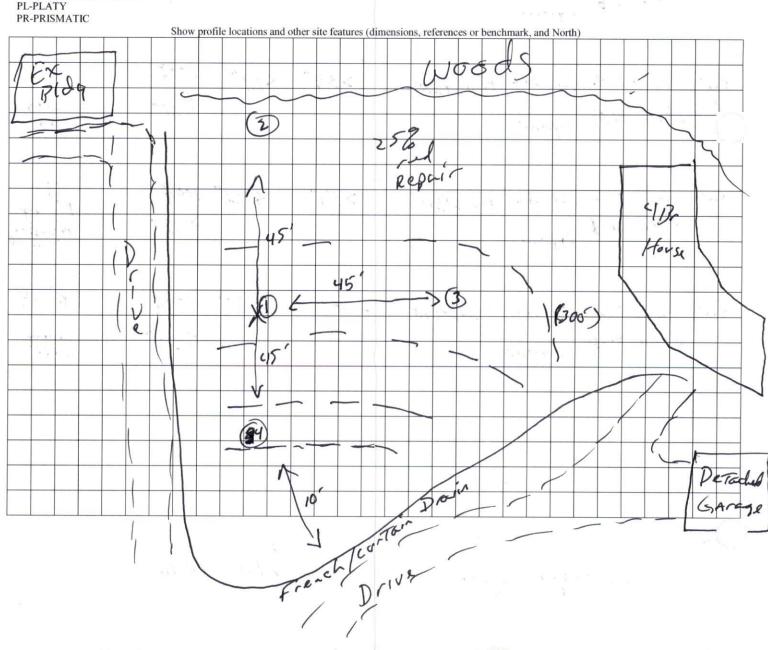
SC-SANDY CLAY

SIC-SILTY CLAY 0.4 - 0.1

EXPANSIVE

C-CLAY

IV



on-S on-S wn Addr Propo Loca Wate Evalu	for ON-S for	SOIL/SI SITE WA Applican	TE EV. STEW.	ALUATIO ATER SY Date E Design Proper blic Ino	ON 'STEM Evaluated: 5-8- In Flow (.1949): 42 ty Recorded:	Property Siz	neet: operty ID: ot #: le #: ode: 2105			
P R O F I L	.1940 Landscape	Horizon			RPHOLOGY 941	.1942	OTHER ROFILE FACTO			
E #	Position/ Slope %	Depth (In.)	Stru	1941 acture/ exture	.1941 Consistence Mineralogy	Soil Wetness/ Color	.1943 Soil Depth (IN.)	.1956 Sapro Class	.1944 Restr Horiz	Profile Class & LTAR
/	1	0-8	25	61	9)					
,	2.5%	8-18	501	SOL		PITTAJUITED		> 10%	> 15% STONE	
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escription	System	Repair System	Other Factors (.1946): Site Classification (.1948):
Available Space (.1945)			Evaluated By: Mah A Fetts
System Type(s)			Others Present:
Site LTAR			

. 10

COMMENTS: ____

LANDSCAPE POSITIONS	GROUP	TEXTURES 4	.1955 LTAR	CONSISTENCE MOIST	WET
R-RIDGE	I	S-SAND	1.2 - 0.8		750 4 4 5 6
S-SHOULDER SLOPE		LS-LOAMY SAND		VFR-VERY FRIABLE	NS-NON-STICKY
L-LINEAR SLOPE				FR-FRIABLE	SS-SLIGHTY STICKY
FS-FOOT SLOPE	II	SL-SANDY LOAM	0.8 - 0.6	FI-FIRM	S-STICKY
N-NOSE SLOPE		L-LOAM		VFI-VERY FIRM	VS-VERY STICKY
H-HEAD SLOPE				EFI-EXTREMELY FIRM	NP-NON-PLASTIC
CC-CONCLAVE SLOPE	Ш	SI-SILT	0.6 - 0.3		SP-SLIGHTLY STICKY
CV-CONVEX SLOPE		SIL-SILT LOAM			P-PLASTIC
T-TERRACE		CL-CLAY LOAM			VP-VERY PLASTIC
FP-FLOOD PLAN		SCL-SANDY CLAY LOAM			

STRUCTURE
SG-SINGLE GRAIN
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