## **Harnett County Environmental Health**

File/Permit Number: SFD 2402-0030 IMPROVEMENT PERMIT County: PIN/Lot Identifier: Home Builders Applicant: Spratur Home Builders SIGNATURE Subdivision (if applicable) High land Hills Block: Section: Expansion System Relocation Change of Use Number of Occupants: 6 Other: Design Wastewater Strength: Domestic Industrial Process Wastewater High Strength Proposed Design Daily Flow: 360 GPD Proposed LTAR (Initial): \_\_\_\_\_ Proposed LTAR (Repair): \_\_\_\_\_ Proposed Wastewater System Type\*: 25% reduction (Initial) Pump Required: ☑ Yes ☐ No ☐ May be required Proposed Wastewater System Type\*: 25% rslucTion (Repair) Pump Required: ☑ Yes ☐ No ☐ May be required \*Please include system classification for proposed wastewater system types in accordance with Rule .1301 Table XXXII Saprolite System (Initial): Yes No Saprolite System (Repair): Yes Yes No Fill System (Initial): Yes No If yes, specify: New Existing (when adding more than 6 inches of fill to system area provide a fill plan) Fill System (Repair): Yes No If yes, specify: New Existing (when adding more than 6 inches of fill to system area provide a fill plan) Max. Trench Depth (Initial)<sup>‡</sup>: ZO Max. Trench Depth (Repair)<sup>‡</sup>: ZO <sup>‡</sup> Measured on the downhill side of the trench Artificial Drainage Required: Yes You If yes, please specify details: Type of Water Supply: Private well Public well Shared well Municipal Supply Spring Other: Drainfield location meets requirements of Rule .0508: Yes 🔽 No 🗌 Drainfield location meets requirements of Rule .0601: Yes 🔀 No 🗍 Permit valid for: 🔯 Five years [site plan submitted pursuant to GS 130A-334(13a)] 🔲 No expiration [plat submitted pursuant to GS 130A-334(7a)] Permit conditions No gutter of foundation Drain shall Empty onto drain Field Authorized Agent's Printed Name: MARK Authorized Agent's Signature: \*See attached site sketch\*

The issuance of this permit in no way guarantees the issuance of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. <u>This permit is subject to revocation if the site plan, plat, or the intended use changes.</u> 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 15A NCAC 18E and to the conditions of this permit.

## **Harnett County Environmental Health**

File/Permit Number: SFD 2402-003C		
CONSTRUCTION AUTHORIZATION		
County: Ha-18TT PIN/Lot Identifier: 0507-11-9546		
County: Harsett PIN/Lot Identifier: 0507-11-9546  Owner: Signature Home Builder Applicant: Signature Home Builders		
Property Location: 1504 Doc's Rd		
Facility Type: 56'x32' SFD		
Number of bedrooms: 3 Number of Occupants: 6 Other:		
New Expansion Repair System Relocation Change of Use		
Basement? Yes No Basement Fixtures? Yes No		
Crawl Space? ☐ Yes ☐ No Slab Foundation? ☐ Yes ☐ No		
Type of Wastewater System* 25% reduction (Initial) 25% reduction (Repair)		
*Please include system classification for proposed wastewater system types in accordance with Rule .1301 Table XXXII		
Design Daily Flow: GPD		
Rule .0403(e) Engineering Design Utilizing Low-flow Fixtures and Low-flow Technologies (S.L. 2013-413 and 2014-120)? Yes In No (if yes, please provide engineering documentation)		
Effluent Standard: ☑ DSE ☐ HSE ☐ NSF/ANSI 40 ☐ TS-II ☐ RCW		
Type of Water Supply: Private well Public well Shared well Municipal Supply Spring Other:		
Installation Requirements/Conditions		
Septic Tank Size: <u>1000</u> gallons Total Trench/Bed Length: <u>360</u> feet Trench/Bed Spacing: <u>9</u> feet on center		
Trench/Bed Width: 36 inches LTAR: .25 gpd/ft² Usable Depth to LC (Initial)*: 32 *Limiting condition		
Soil Cover: 6 inches Slope Corrected Maximum Trench/Bed Depth <sup>‡</sup> : 20 inches * Measured on the downhill side of the trench		
Pump Tank Size (if applicable):		
Pump Requirements: ft. TDH vs GPM Grease Trap Size (if applicable): gallons		
Distribution Method: ☐ Serial ☐ D-Box or Parallel ☐ Pressure Manifold(s) ☐ LPP ☐ Other:		
Artificial Drainage Required: Yes No If yes, please specify details:		
Legal Agreements (If the answer is "Yes" to any type of legal agreements, please attach a copy of the agreement.)		
Multi-party Agreement Required [Rule .0204(g)]: Yes No		
Easement, Right-of-Way, or Encroachment Agreement Required [Rule .0204(d)]: Yes No		
Declaration of Restrictive Covenants: Yes No Pre-Construction Conference Required: Yes No		
Management Entity Required: Yes No Minimum O&M Requirements:		
Conditions:		
The requirements of 15A NCAC 18E are incorporated by reference into this permit and shall be met. Systems shall be installed in accordance		
with the attached site sketch. This Construction Authorization is subject to revocation if the site plan, plat, or the intended use changes. The Construction Authorization shall not be affected by a change in ownership of the site. This Construction Authorization is subject to compliance		
with the provisions of 15A NCAC 18E, or 15A NCAC 18A .1900, as applicable, and to the conditions of this permit.		
Authorized Agent's Printed Name: Maph Usborns REHS  Expiration Date: 4-29-29  Date: 4-29-24		
Authorized Agent's Signature: Mach Chreth Date: 4-29-24		

\*See attached site sketch\*

## **Harnett County Environmental Health**

## SITE SKETCH

PIN 0507-11-9546	Permit Number SFD Z402-0030
Signatura Home Buildes	Highland Alls / Lot Z
MARL Osbors REHS ML M	Subdivision/Section/Lot Number 2EHS 4-29-24
Authorized State Agent	Date

System components represent approximate contours only. The contractor must flag the system prior to beginning the installation to ensure that the proper grade is maintained.

