Harnett County Environmental Health

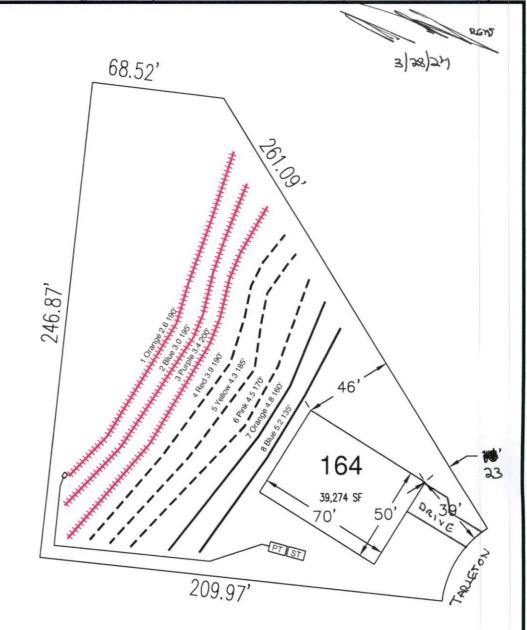
| File/Permit Number: SFD2402-0061 | | | | | | |
|---|--|--|--|--|--|--|
| CONSTRUCTION AUTHORIZATION | | | | | | |
| County: Harnett PIN/Lot Identifier: 0642-95-4999.000 | | | | | | |
| Owner: KB Home Raleigh Applicant: same | | | | | | |
| Property Location: 273 Tarleton | | | | | | |
| Facility Type: SFD (50'x52') | | | | | | |
| Number of bedrooms: 3 Number of Occupants: 6 Other: | | | | | | |
| ■ New | | | | | | |
| Basement? ☐ Yes ☐ No Basement Fixtures? ☐ Yes ☐ No | | | | | | |
| Crawl Space? ☐ Yes ☐ No Slab Foundation? ☐ Yes ☐ No | | | | | | |
| Type of Wastewater System* Accepted (Initial) Accepted (Repair | | | | | | |
| *Please include system classification for proposed wastewater system types in accordance with Rule .1301 Table XXXII | | | | | | |
| Design Daily Flow: 360 GPD Wastewater Strength: Domestic High Strength Industrial Process Wastewater | | | | | | |
| Rule .0403(e) Engineering Design Utilizing Low-flow Fixtures and Low-flow Technologies (S.L. 2013-413 and 2014-120)? Yes 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: 1000 gallons Total Trench/Bed Length: 585 feet Trench/Bed Spacing: 9 feet on center | | | | | | |
| Trench/Bed Width: 3 inches LTAR: .35 gpd/ft² Usable Depth to LC (Initial)x: 36 xLimiting condition | | | | | | |
| Soil Cover: 12 inches Slope Corrected Maximum Trench/Bed Depth [‡] : 24 inches * Measured on the downhill side of the trench | | | | | | |
| Pump Tank Size (if applicable): gallons Requires more than one pump? Yes | | | | | | |
| 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 I 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 | | | | | | |
| Declaration of Restrictive Covenants: Yes No Pre-Construction Conference Required: Yes No | | | | | | |
| Management Entity Required: Yes No Minimum O&M Requirements: | | | | | | |
| Conditions: Septic system size requested by applicant. | | | | | | |
| | | | | | | |
| | | | | | | |
| 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. <i>This Construction Authorization is subject to revocation if the site plan, plat, or the intended use changes.</i> 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: Oliver Tolksdorf REHS Expiration Date: 3/27/29 | | | | | | |
| | | | | | | |
| Authorized Agent's Signature: | | | | | | |

NCDHHS/DPH/EHS/OSWP

Harnett County Environmental Health

| | | | File/Per | mit Number: SF | D2402-0061 | |
|--|--|-------------------------|---------------------|-----------------------|---------------------------|--|
| | IMPRO | VEMENT PERM | | | | |
| County: Harnett | | | | | | |
| PIN/Lot Identifier: 0642-95-4999.000 | | | | | | |
| | | Applicant | same | | | |
| Property Location: 273 Tarleton | | 1809 | | | | |
| Subdivision (if applicable) Birchwood G | rove | Lot #: _ | 164 Blo | ock: | Section: | |
| New 🔳 Ex | pansion | System Relocation | | Change of Use | | |
| Facility Type: SFD(52'x50') | | | | | | |
| Number of bedrooms: 3 Number of | of Occupants: 6 | her: | | | | |
| Design Wastewater Strength: 🔳 Domesti | c 🔲 Hi | gh Strength | Industrial Prod | cess Wastewater | | |
| Proposed Design Daily Flow: 360 | GPD Propo | sed LTAR (Initial): .35 | Propose | ed LTAR (Repair): _ | 35 | |
| Proposed Wastewater System Type*: AC | | (Initial) | Pump Required: | Yes No | May be required | |
| Proposed Wastewater System Type*: Ac | cepted | (Repair) | Pump Required: | Yes No | May be required | |
| *Please include system classification for proposed wastewater system types in accordance with Rule .1301 Table XXXII | | | | | | |
| Effluent Standard: DSE HSE | NSF/ANSI 40 T | S-I TS-II RCV | V | | | |
| Saprolite System (Initial): \square Yes \blacksquare No | Saprolite System | n (Repair): 🗌 Yes 🔳 | No | | | |
| Fill System (Initial): Yes No If yes, | , specify: New | Existing (when adding r | more than 6 inche | s of fill to system a | area provide a fill plan) | |
| Fill System (Repair): Yes No If yes | s, specify: New | Existing (when adding | more than 6 inche | es of fill to system | area provide a fill plan) | |
| Usable Depth to LC (Initial)x: 36 | | | | | | |
| Max. Trench Depth (Initial)‡: 24 | Max. Trench De | pth (Repair)‡: 24 | [‡] Meas | ured on the down | hill side of the trench | |
| Artificial Drainage Required: 🗌 Yes 🔳 | No If yes, please specif | y details: | | | | |
| Type of Water Supply: Private well | Public well Sha | red well 🔳 Municip | al Supply Sp | oring Other | · | |
| Drainfield location meets requirements of | Rule .0508: Yes 🔳 | No Drainfield loca | tion meets require | ements of Rule .06 | 601: Yes 🔳 No 🗌 | |
| Permit valid for: Five years [site plan si | ubmitted pursuant to G | S 130A-334(13a)] | No expiration [plat | t submitted pursua | ant to GS 130A-334(7a)] | |
| Permit conditions: | Harris Control | | | | | |
| | | | Here | | | |
| | | | | | | |
| l ———————————————————————————————————— | | | | | | |
| 0111 | Tandari DELIC | | | 250 W 254 W56 P | 2/27/20 | |
| | Tolksdorf REHS | ` | | Expiration Date | : 3/2//29 | |
| Authorized Agent's Signature: | 5 m CCA |) | | Date: 3/27/24 | | |
| *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.



System: HHHHHHH Repair: ----

System: Pressure Manifold Lines: 1-3, (585') Accepted Status System 0.35 Soil LTAR 24" Trench Bottom

Repair: Pressure Manifold Lines: 4-6, (545') Accepted Status System 0.35 Soil LTAR 24" Trench Bottom

- *Keep tanks and drain lines 10' from property lines.
- *Not a survey.
- *Not a guarantee of a septic permit.
- *Keep supply lines >5' from property lines.
- *Some lines are flagged longer in the field than lengths indicate.
- *No grading septic area.



Central Carolina Soil Consulting, PLLC 1900 South Main Street, Suite 110 Wake Forest, North Carolina 27587 Phone (919)569-6704 Fax (919)569-6703

5-Bedroom Septic Layout Lot 164, Birchwood Subdivision Harnett County, North Carolina Job# : 3753 Drawn By : LW Date : 04/15/2023 Revision: