

ROY COOPER • ernor

KODY H. KINSLEY • Secretary

MARK BENTON • Chief Deputy Secretary for Health

SUSAN KANSAGRA • Assistant Secretary for Public Health

Division of Public Health

Submittal Includes: (a2) Improvement Permit (a2) Construction Authorization Fee \$
IMPROVEMENT PERMIT FOR G.S. 130A-335(
County: Harnett
PIN/Lot Identifier: 9566-75-9854
Issued To: Brandon & Alicia Raines
Property Location: 0 Johnsonville School Road, Cameron, NC 28326 (755 J-ville School
Subdivision (if applicable) Lot #: Block: Section:
LSS Report Provided: Yes No No
If yes, name and license number of LSS: John Kase, NCLSS# 1323
New Expansion System Relocation Change of Use
Facility Type: Single-Family Residence Number of bedrooms: 3 Number of Occupants: 6 Other:
Design Wastewater Strength: Domestic High Strength Industrial Process Wastewater
Proposed Design Daily Flow: 360 GPD Proposed LTAR (Initial): 0.400 Proposed LTAR (Repair): 0.400
Proposed Wastewater System Type*: IB - Accepted (25% Reduction) - At-Grade w/ cover (Initial) Pump Required: Yes No May be required.
Proposed Wastewater System Type*: IIB - Accepted (25% Reduction) - At-Grade w/ cover (Repa Pump Required: Yes No May be require
*Please include system classification for proposed wastewater system types in accordance with Rule .1301 Table XXXII
Effluent Standard: ■ DSE ☐ HSE ☐ NSF/ANSI 40 ☐ TS-I ☐ TS-II ☐ RCW
Saprolite System (Initial): Yes No Saprolite System (Repair): 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 plant
Fill System (Repair): Yes No If yes, specify: New Existing (when adding more than 6 inches of fill to system area provide a fill pl
Usable Depth to L Initial) ^x : 25 Usable Depth to LC (Repa x: 25 x Limiting Condition
Max. Trench Depth (Initial)*: 12 Max. Trench Depth (Repair)*: 12 *Measured on the downhill side of the trench
Artificial Drainage Required: Yes No 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(7)]
Permit conditions: Permit is subject to suspension or revocation if the Site Plan changes or the intended use changes, which significantly impact permit Maintain all required setbacks pursuant to 15A NCAC 18E SECTION .0600 – LOCATION OF WASTEWATER SYSTEMS. No grading should be completed within the areas reserved for the initial and repair septic areas. When grading the lot, no cuts of 2' or greater should be within 15' of the areas reserved for septic. There should be no cutting or filling within the areas reserved for septic. See additional permit conditions attached.
Licensed Soil Scientist Print Name: John Kase Licensed Soil Scientist Signature: Date: 12/2/2024
Licensed Soil Scientist Signature: Date: 12/2/2024

The LSS evaluation is being submitted pursuant to and meets the requirements of G.S. 130A-335(a2).

See attached site sketch





Permit/File #: 2111 0092

This Section for Local Health Department Use

	Initial submittal received:	12.924 Date	by <u>Mb</u> Initials	
G.S. 130A-335(a3) states the follo	owing:			
When an applicant for an Improvement P department, the common form developed within five business days of receiving the Permit includes all of the required componshall notify the applicant of the componed epartment to cure the deficiencies in the is complete within five business days after act within any period set out in this subsecommon form for use as the Improvement	d by the Department, and a soil evapplication, conduct a completent enerts. If the local health departments needed to complete the Improvement Permit. The local har the local health department reception, the applicant may treat the	aluation pursuant to sub ess review of the submitt ent determines that the li evement Permit. The appl dealth department shall n eives the additional infor	section (a2) of this section al. A determination of commprovement Permit is inco- icant may submit addition thake a final determination mation from the applicant.	the local health department shall, pleteness means that the Improvement implete, the local health department al information to the local health as to whether the Improvement Permit If the local health department fails to
The review for completeness of t Permit is determined to be:	his Improvement Permit w	as conducted in acc	ordance with G.S. 13	0A-335(a3). This Improvement
☐ Incomplete (If box is checked	d, information in this section	on is required.)		
The following items are missing:				
			7	
Copies of this were sent to the LS	S and the Applicant on	Date		
State Authorized Agent:			Da	te:
Complete State Authorized Agent:	h dh RGH	5	Da	te: 12-12- 24
This Improvement Permit is issu attached here. The issuance of to for checking with appropriate goplat, or the intended use change permit is subject to compliance to	this permit in no way guars overning bodies in meeting ss. The Improvement Perm	antees the issuance their requirements nit shall not be affec	of other permits. The s. This permit is subjected by a change in o	e permit holder is responsible ect to revocation if the site plan, wnership of the site. This
The Department, the Department any liabilities, duties, and responsible evaluations, submittals, or action	nsibilities imposed by state	ute or in common la	w from any claim ar	sing out of or attributed to
Improvement Permit Expiration	Date: /2-/2- 7	9		

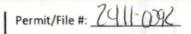
See attached site sketch



CONSTRUCTION AUTHORIZATION FOR G.S. 130A-335(a

County: Harnett	Pre-Construction Confere Required: Yes ☐ No ■
PIN/Lot Identifier: 9566-75-98	154
Issued To: Brandon & Alicia	Raines
Property Location: 0 Johnson	ville School Road, Cameron, NC 28326
AOWE/PE Plans/Evaluations Provide	ed: Yes No If yes, name and license number of AOWE/PE: Alan Clapp, 10017E
Facility Type: Single-Family	Residence
Number of bedrooms: 3 Number	mber of Occupants: 6 Other:
■ New	Repair System Relocation Change o Use
Basement? Yes	■ No Basement Fixtures? Yes ■ No
Crawl Space? Yes	
Type of Wastewater System* IIB -	Accepted (25% Reduction) - At-Grade w/ cover (Initial) IIB - Accepted (25% Reduction) - At-Grade w/ cover (Repair)
*Please include system classificatio	n for proposed wastewater system types in accordance with Rule .1301 Table XXXII
Design Daily Flow: 360	GPD Wastewater Strength: ■ Domestic
Session Law 2014-120 Section 53 E (if yes, please provide engineering of	Ingineering Design Utilizing Low- Fixtures and Low-flow Technologies? Yes No documentation)
Effluent Standard: DSE	HSE NSF/ANSI 40 TS-I TS-II RCW
Type of Water Supply: Private w	vell Public well Shared well Municipal Supply Spring Other:
Trench/Bed Width: 36 inches Soil Cover: 12 inches Slope Pump Tank Size (if applicable): 10 Pump Requirements: ft. TD Distribution Method: Serial Artificial Drainage Required: Yes Legal Agreements (If the answer is Multi-party Agreement Required 1.6 Easement, Right-of-Way, or Encroa	Total Trench/Bed Length: 300 feet Trench/Bed Spacing: 9 feet on center Page 1
Maintain all required setbacks State approved tanks with cast	or revocation if the Site Plan changes or the intended use changes, which significantly impact permit. pursuant to 15A NCAC 18E SECTION .0600 – LOCATION OF WASTEWATER SYSTEMS. in place inlet and outlet boots required for all septic and/or pump tanks. the system is installed. There will be a fee to re-flag the septic system layout. is attached.
with the attached site sketch. This Construction Authorization shall n with the provisions of 15A NCAC 1 AOWE/PE Print Name: Alan Cla	E are incorporated by reference into this permit and shall be met. Systems shis Construction Authorization is subject to revocation if the site plan, plat, or the ot be affected by a change in ownership of the site. This Construction Authorization Authorization applicable, and to the conditions of this permit. App Alan Clapp Date: 12/2/2024 Date: 12/2/2024

See attached site sketch





This Section for Local Health Department Use Only

Initial submittal received: 12-424

	Date Initials
G.S. 130A-335(a5) states the following:	
Improvement Permit and Construction Authorization Department, and any necessary signed and sealed engineer or a person certified pursuant to Article 5 department shall, within five business days of receit the Construction Authorization or Improvement Perdetermines that the Construction Authorization or applicant of the components needed to complete the additional information to the local health department shall me Authorization. The local health department shall me Authorization is complete within five business days department fails to act within any period set out in apply for the building permit for the project upon the Authorization by the local health department or if the licensed engineer submitting the evaluation pursual Authorization or Improvement Permit and Construction.	on an Improvement Permit and Construction Authorization together, submits a Construction Authorization, or an important and construction of the permit fee charged by the local health department, the common form developed by the plans or evaluations conducted by a person licensed pursuant to Chapter 89C of the General Statutes as a licensed of Chapter 90A of the General Statutes as an Authorized On-Site Wastewater Evaluator, the local health ving the application, conduct a completeness review of the submittal. A determination of completeness means the rmit and Construction Authorization includes all of the required components. If the local health department amprovement Permit and Construction Authorization or Improvement Permit and Construction Authorization. The applicant may submit tent to cure the deficiencies in the Construction Authorization or Improvement Permit and Construction ake a final determination as to whether the Construction Authorization or Improvement Permit and Construction after the local health department receives the additional information from the applicant. If the local health this subsection, the applicant may treat the failure to act as a determination of completeness. The applicant may the decision of completeness of the Construction Authorization or Improvement Permit and Construction the local health department fails to act within five business days. The Authorized On-Site Wastewater Evaluator or action to this subsection may request that the local health department revoke or suspend the Construction action Authorization for cause. Upon written request of the Authorized On-Site Wastewater Evaluator or licensed or revoke the Construction Authorization or Improvement Permit and Construction pursuant to G.5 form for use as the Construction Authorization or Improvement Permit and Construction pursuant to G.5 form for use as the Construction Authorization or Improvement Permit and Construction Authorization pursuant to G.5 form for use as the Construction Authorization.
The review for completeness of this Con	struction Authorization was conducted in accordance with G.S. 130A-335(a5). This
Construction Authorization is determine	d to be:
☐ Incomplete (If box is checked, inform	nation in this section is required
The following items are missing:	
Copies of this were sent to the AOWE/PE	
State Authorized Agent:	Date Date:
State Authorized Agent: Mal	
State Authorized Agent:	Date of Issuance: 12-12-29
attached here. This Construction Autho Construction Authorization shall not be	d pursuant to G.S. 130A-335(a2) and (a5) using the signed and sealed plans or evaluation rization is subject to revocation if the site plan, plat, or the intended use changes The affected by a change in ownership of the site. This Construction Authorization is subject e Laws and Rules for Sewage Treatment and Disposal and to the conditions of this pe
any liabilities, duties, and responsibilities plans, evaluations, preconstruction con the General Statutes as a licensed engin Authorized On-Site Wastewater Evalua agents, and the local health department	horized agents, and the local health departments shall be discharged and released from es imposed by statute or in common law from any claim arising out of or attributed to ference findings, submittals, or actions from a person licensed pursuant to Chapter 89C oneer or a person certified pursuant to Article 5 of Chapter 90A of the General Statutes as stor in GS 130A-335(a2), (a5), and (a7). The Department, the Department's authorized its shall be responsible and bear liability for their actions and evaluations and other authors the issuance of the operations permit pursuant to GS 130A-337.