Harnett County Environmental Health

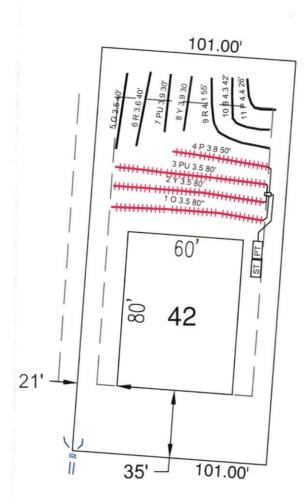
		F	File/Permit Number: SFD2412-0081
	IM	IPROVEMENT PERMIT	
County: Harnett			
PIN/Lot Identifier: 0642-96-2938.	000		
Owner: KB Home Raleigh		Applicant:	
Property Location: 676Thomas Ga	ige Dr		
Subdivision (if applicable) Birchwoo	d Grove	Lot #: 42	Block: Section:
New 🔳		System Relocation	
Facility Type: SFD (60'x49')			
Number of bedrooms: 3Numl	per of Occupants: 6	Other:	
		High Strength Indust	
		Proposed LTAR (Initial):35	
Proposed Wastewater System Type*:	Accepted System	n (Initial) Pump R	equired: 🔳 Yes 🗌 No 🔲 May be required
			equired: 🔳 Yes 🗌 No 🔲 May be required
*Please include system classification f	or proposed wastewo	ater system types in accordance with Ru	le .1301 Table XXXII
Effluent Standard: 🔳 DSE 🗌 HS	E 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 plan)
Fill System (Repair): Yes 🔳 No	if yes, specify: New	w Existing (when adding more than	n 6 inches of fill to system area provide a fill plan)
		Usable Depth to LC (Repair)x: 36	
Max. Trench Depth (Initial)‡: 24	Max. Tren	nch Depth (Repair)‡: 24	[‡] Measured on the downhill side of the trench
Artificial Drainage Required: Yes	No If yes, please	specify details:	
Type of Water Supply: Private wel	Public well	Shared well Municipal Supply	Spring Other:
Drainfield location meets requiremen	ts of Rule .0508: Yes	■ No Drainfield location meet	s requirements of Rule .0601: Yes 🔳 No 🗌
Permit valid for: 🔳 Five years [site pl	an submitted pursuar	nt to GS 130A-334(13a)] No expirat	ion [plat submitted pursuant to GS 130A-334(7a)]
Permit conditions:			
Authorized Agent's Printed Name	iver Tolksdorf REHS		Expiration Date: 1/16/35
Authorized Agent's Signature:	M M	(SE13)	Date: 1/16/25
	S	ee 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: SFD2412-0081
		CONSTRUCTION AUTHORIZATION
County: Harnett	(PIN/Lot Identifier: 0642-96-2938.000
Owner: KB Hon		Applicant:
Property Location	676 Thomas G	
Facility Type: SF	D (60'x49')	
Number of bedroo	oms: 3 Numb	per of Occupants: 6 Other:
■ New		Repair System Relocation Change of Use
Basement?	Yes	■ No Basement Fixtures? Yes No
Crawl Space?	Yes	■ No Slab Foundation? ■ Yes No
Type of Wastewat	ter System* Accep	pted System (Initial) Accepted System (Repa
*Please include sy	stem classification fo	or proposed wastewater system types in accordance with Rule .1301 Table XXXII
Design Daily Flows	360	GPD Wastewater Strength: Domestic High Strength Industrial Process Wastewater
	ineering Design Utiliz	zing Low-flow Fixtures and Low-flow Technologies (S.L. 2013-413 and 2014-120)? Yes No cumentation)
Effluent Standard:	: DSE _ HSE	E NSF/ANSI 40 TS-I TS-II RCW
Type of Water Sup	oply: Private well	Public well Shared well Municipal Supply Spring Other:
Installation Requi	rements/Conditions	S
Septic Tank Size: _	1000 gallons	Total Trench/Bed Length: 290 feet Trench/Bed Spacing: 9 feet on center
		LTAR: .35 gpd/ft² Usable Depth to LC (Initial)*: 36 xLimiting condition
Soil Cover: 12	inches Slope Co	rrected Maximum Trench/Bed Depth [‡] : 24 inches * Measured on the downhill side of the trench
		gallons Requires more than one pump? Yes No
		vs GPM Grease Trap Size (if applicable): gallons
Distribution Metho	od: 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 "Ye	es" to any type of legal agreements, please attach a copy of the agreement.)
Multi-party Agree	ment Required [Rule	e .0204(g)]: ☐ Yes ■ No
Easement, Right-o	f-Way, or Encroachn	ment Agreement Required [Rule .0204(d)]:
Declaration of Res	trictive Covenants:	Yes No Pre-Construction Conference Required: Yes No
Management Entit	ty Required: 🗌 Yes	No Minimum O&M Requirements:
Conditions:		
The requirements with the attached	of 15A NCAC 18E ar	re incorporated by reference into this permit and shall be met. Systems shall be installed in accordance construction Authorization is subject to revocation if the site plan, plat, or the intended use changes. The
Construction Auth with the provision	norization shall not b ns of 15A NCAC 18E,	be affected by a change in ownership of the site. This Construction Authorization is subject to compliance or 15A NCAC 18A .1900, as applicable, and to the conditions of this permit.
Authorized Agent'	s Printed Name: Oli	iver Tolksdorf REHS Expiration Date: 1/16/29
Authorized Agent's	s Signature:	0613 Date: 1/16/25
		Date.

See attached site sketch



1/11/25

System: HHHHHH Repair: ———

System: Pressure Manifold Lines: 1-4, (290') Ezflow or Chambers 25% 0.35 Soil LTAR 24" Trench Bottom

Repair: Pressure Manifold Lines: 1-2, (263') Ezflow or Chambers 25% 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.

GRAPHIC SCALE 1" = 50' 50 0 50 100



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

3-Bedroom Septic Layout Lot 42, Birchwood Grove Subdivision Harnett County, North Carolina Job# : 3753 Drawn By : MB Date : 12/18/2024

Revision: