Form A2CF-24.1



ROY COOPER • Governor

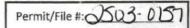
KODY H. KINSLEY • Secretary

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 \$
Submittal includes.			
	IIVIPROVEM	ENT PERMIT FOR G.S. 130A-335	5(a2)
County: Harnett			
PIN/Lot Identifier: 068			
Issued To: Clayton P	roperties Group, 2521 Schie	ffelin Rd., Suite 116, Apex, NC 275	502
	Sagamore Ave., Angier, NC		
Subdivision (if applicab	le) Cambridge Reserve	Lot #: 23	Block: Section:
LSS Report Provided: Y			
If yes, name and license	e number of LSS: Michael D. Ea	ker, 1030	
New 🔳	Expansion	System Relocation	Change of Use
Facility Type: Single I			
Number of bedrooms:	3 Number of Occupants: 80	Other:	
		☐ High Strength ☐ Industri	
Proposed Design Daily	Flow: 360 GPD	Proposed LTAR (Initial): 0.3 gpd/ft2	roposed LTAR (Repair): 0.3 gpd/ft2
Proposed Wastewater	System Type*: Pump to Accepte	ed (25% reduction) (Initial) Pump Red	quired: Yes No May be required
Proposed Wastewater	System Type*: Pump to Accepte	ed (25% reduction) (Repair) Pump Req	uired: Yes No May be required
		ater system types in accordance with Rule	
Effluent Standard:	DSE HSE NSF/ANSI 40	TS-I TS-II RCW	
Saprolite System (Initia	I): Yes No Saprolite	System (Repair): Yes No	
			inches of fill to system area provide a fill plan)
			6 inches of fill to system area provide a fill plan)
Usable Depth to LC (Init	tial)x: 37"	Usable Depth to LC (Repair)x: 37"	* Limiting Condition
Max. Trench Depth (Ini	tial)‡: 22" Max. Tre	ench Depth (Repair)*: 22"	X Limiting Condition Measured on the downhill side of the trench
	aired: Yes No If yes, pleas		
Type of Water Supply:	Private well Public well	Shared well Municipal Supply	Spring Other:
Drainfield location mee	ets requirements of Rule .0508: Yes	No Drainfield location meets	requirements of Rule .0601: Yes 🔳 No 🗌
Permit valid for: Fiv	e years [site plan submitted pursua	nt to GS 130A-334(13a)] No expiration	n [plat submitted pursuant to GS 130A-334(7a)]
Ensure 6 inches approve	et and map. Do not disturb, compact, ried fill cover is maintained over system Print Name: Michael D. Eaker	ut or cut any self within the septic drainfield are after instantation.	Certification Number 10013E
Licensed Soil Scientist S	Signature: Mr M	国際の対象	Date: 02/27/2025
T	The LSS evaluation is being submit *	ed pursuant by our meets the requirements see attached the sketch*	nts of G.S. 130A-335(a2).
NCDHHS/DPH/EHS/OSWP		1 2 0mi	Revised January 2024





This Section for Local Health Department Use Only

Initial submittal received: 3 25 25 by RC Initials

G.S. 130A-335(a3) states the following:

When an applicant for an Improvement Permit submits to a local health department an Improvement Permit application, the permit fee charged by the local health department, the common form developed by the Department, and a soll evaluation pursuant to subsection (a2) of this section, the local health department shall, within five business days of receiving the application, conduct a completeness review of the submittal. A determination of completeness means that the Improvement Permit is incomplete, the local health department determines that the Improvement Permit is incomplete, the local health department shall notify the applicant of the components needed to complete the Improvement Permit. The applicant may submit additional information to the local health department to cure the deficiencies in the Improvement Permit. The local health department shall make a final determination as to whether the Improvement Permit is complete within five business days after the local health department receives the additional information from the applicant. If the local health department fails to act within any period set out in this subsection, the applicant may treat the failure to act as a determination of completeness. The Department shall develop a common form for use as the Improvement Permit.

The review for completeness of this improvement Permit was conducted in accordance with G.S. 130A-335(a3). This improvement

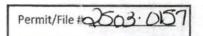
This Improvement Permit is issued pursuant to G.S. 130A-335 (a2) and (a3) using the signed and sealed LSS/LG evaluation(s) attached here. The issuance of this permit in no way guarantees the issuance of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This permit is subject to revocation if the site plan, plat, or the intended use changes. 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.

The Department, the Department's authorized agents, and the local health departments shall be discharged and released from any liabilities, duties, and responsibilities imposed by statute or in common law from any claim arising out of or attributed to evaluations, submittals, or actions from a licensed soil scientist or licensed geologist pursuant to GS 130A-335(a2).

Improvement Permit Expiration Date: 3-27-30

See attached site sketch





CONSTRUCTION AUTHORIZATION FOR G.S. 130A-335(a2)

County: Harnett Pre-Construction Conference Required: Yes No						
PIN/Lot Identifier: 0681-45-3071.000 - Cambridge Reserve, Lot 23						
Issued To: Clayton Properties Group, 2521 Schieffelin Rd., Suite 116, Apex, NC 27502						
Property Location: 22 Sagamore Ave., Angier, NC 27501						
AOWE/PE Plans/Evaluations Provided: Yes No I f yes, name and license number of AOWE/PE: Michael D. Eaker 10013E						
Facility Type: Single Family Dwelling						
Number of bedrooms: 3 Number of Occupants: 6 or less Other:						
■ New						
Basement?						
Crawl Space? ■ Yes No Slab Foundation? ■ Yes No						
Type of Wastewater System* Pump to Accepted (25% reduction) (Initial) Pump to Accepted (25% reduction) (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 WW						
Session Law 2014-120 Section 53, Engineering Design Utilizing Low-flow Fixtures and Low-flow Technologies? Yes (If yes, please provide engineering documentation)						
Effluent Standard: DSE HSE NSF/ANSI 40 TS-I 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: 300 feet Trench/Bed Spacing: 9 feet on center						
Trench/Bed Width: 36 inches LTAR: 0.3 gpd/ft² Usable Depth to LC (Initial)X: 37 xLimiting condition						
Soil Cover: 6+ inches Slope Corrected Maximum Trench/Bed Depth [‡] : 22 inches * Measured on the downhill side of the trench						
Pump Tank Size (if applicable): 1000 gallons Requires more than 1 pump? Yes No						
Pump Requirements: 15.7 ft. TDH vs. 28.44 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 [.0204(g)]: Yes No Declaration of Restrictive Covenants: Yes No						
Easement, Right-of-Way, or Encroachment Agreement Required [.0301(b)]: Yes						
Management Entity Required: Yes No Minimum O&M Requirements:						
Permit conditions:						
Install as per detail sheet and map. Do not disturb, compact, rut or cut any soil within the septic drainfield area.						
Ensure 6 inches approved fill cover is maintained over system after installation. Certification Number						
10013E						
Permit conditions: Install as per detail sheet and map. Do not disturb, compact, rut or cut any soil within the septic drainfield area. Ensure 6 inches approved fill cover is maintained over system after installation. Certification Number 10013E						
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.						
AOWE/PE Print Name: Michael D. Eaker						
AOWE/PE Signature:						
This AOWE/PE submittal is pursuant to and meets the requirements of G.S. 130A-335(a2) and (a5).						

See attached site sketch





This Section for Local Health Department Use Only

Initial submittal received: 3.25.25 by <u>PC</u>

Initials

G.S. 130A-335(a5) states the following:

When an applicant for a Construction Authorization, or an Improvement Permit and Construction Authorization together, submits a Construction Authorization, or an Improvement Permit and Construction Authorization application together, the permit fee charged by the local health department, the common form developed by the Department, and any necessary signed and sealed plans or evaluations conducted by a person licensed pursuant to Chapter 89C of the General Statutes as a licensed engineer or a person certified pursuant to Article 5 of Chapter 90A of the General Statutes as an Authorized On-Site Wastewater Evaluator, the local health department shall, within five business days of receiving the application, conduct a completeness review of the submittal. A determination of completeness means that the Construction Authorization or Improvement Permit and Construction Authorization includes all of the required components. If the local health department determines that the Construction Authorization or Improvement Permit and Construction Authorization is incomplete, the local health department shall notify the applicant of the components needed to complete the Construction Authorization or Improvement Permit and Construction Authorization. The applicant may submit additional information to the local health department to cure the deficiencies in the Construction Authorization or Improvement Permit and Construction Authorization. The local health department shall make a final determination as to whether the Construction Authorization or Improvement Permit and Construction Authorization is complete within five business days after the local health department receives the additional information from the applicant. If the local health department fails to act within any period set out in this subsection, the applicant may treat the failure to act as a determination of completeness. The applicant may apply for the building permit for the project upon the decision of completeness of the Construction Authorization or Improvement Permit and Construction Authorization by the local health department or if the local health department fails to act within five business days. The Authorized On-Site Wastewater Evaluator or licensed engineer submitting the evaluation pursuant to this subsection may request that the local health department revoke or suspend the Construction Authorization or Improvement Permit and Construction Authorization for cause. Upon written request of the Authorized On-Site Wastewater Evaluator or licensed engineer, the local health department shall suspend or revoke the Construction Authorization or Improvement Permit and Construction Authorization pursuant to G.S. 130A-23. The Department shall develop a common form for use as the Construction Authorization.

The review for completeness of this Construction	n Authorization was conducted in	accordance with G.S. 130A-	335(a5). This	
Construction Authorization is determined to be:				
☐ Incomplete (If box is checked, information in	n this section is required.)			
The following items are missing:				1
Copies of this were sent to the AOWE/PE and the				
State Authorized Agent:	Date	Data		
State Authorized Agent.		Date:		
Complete				Name (Street
State Authorized Agent:	REHS	Date of Issuance:	3-27-2	25
This Construction Authorization is issued pursua attached here. This Construction Authorization Construction Authorization shall not be affected to compliance with the provisions of the Laws a	is subject to revocation if the site d by a change in ownership of the	e plan, plat, or the intended e site. This Construction Au	use changes. The	e ject
The Department, the Department's authorized any liabilities, duties, and responsibilities imposplans, evaluations, preconstruction conference the General Statutes as a licensed engineer or a Authorized On-Site Wastewater Evaluator in GS agents, and the local health departments shall to obligations under State law or rule, including the	sed by statute or in common law in findings, submittals, or actions from a person certified pursuant to Arti S 130A-335(a2), (a5), and (a7). The be responsible and bear liability for	from any claim arising out on a person licensed pursuicle 5 of Chapter 90A of the Department, the Department or their actions and evaluate	of or attributed to lant to Chapter 89 General Statutes lent's authorized tions and other	o 9C of
Construction Authorization Expiration Date:	3-27-30			