## **Harnett County Environmental Health**

	File/Permit Number: SFD2503-0171	
	IMPROVEMENT PERMIT	
County: Harnett		
PIN/Lot Identifier: 0642-96-8487.	000	
Owner: KB Home	Applicant:	
Subdivision (if applicable) Birchwood	d Grove Lot #: 140 Block: Section:	
	Expansion System Relocation Change of Use	
Facility Type: SFD(60'x49')		
Number of bedrooms: 3 Num	per of Occupants: 6 Other:	
Design Wastewater Strength: 🔳 Dor		
Proposed Design Daily Flow: 360	GPD Proposed LTAR (Initial): .35 Proposed LTAR (Repair): .35	
Proposed Wastewater System Type*		
Proposed Wastewater System Type*	Accepted (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 HS	E NSF/ANSI 40 TS-II RCW	
Saprolite System (Initial): Yes	No Saprolite System (Repair): ☐ Yes ■ No	
Fill System (Initial): Yes No I	f yes, specify: New Existing (when adding more than 6 inches of fill to system area provide a fill pla	
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 LC (Repair) <sup>x</sup> : 36 x Limiting Condition	
Max. Trench Depth (Initial)*: 24	Max. Trench Depth (Repair) <sup>‡</sup> : 24	
Artificial Drainage Required: Yes	■ No If yes, please specify details:	
Type of Water Supply: Private we	II ☐ Public well ☐ Shared well ■ Municipal Supply ☐ Spring ☐ Other:	
Drainfield location meets requiremen	nts of Rule .0508: Yes 🔳 No 🗌 Drainfield location meets requirements of Rule .0601: Yes 🔳 No	
Permit valid for: Five years [site p	lan submitted pursuant to GS 130A-334(13a)] 🔲 No expiration [plat submitted pursuant to GS 130A-334(	
Permit conditions:		
Authorized Agent's Printed Name: C	liver Tolksdorf Expiration Date: 4/10/30	
Authorized Agent's Signature:	Pate: 4/10/25	
*See attached site sketch*		
The issuence of this name it is us	way grown took the increase of other paymits. The narmit helder is reconneithe for the chine.	
	way guarantees the issuance of other permits. The permit holder is responsible for checking we meeting their requirements. This permit is subject to revocation if the site plan, plat, or the	
	ovement Permit shall not be affected by a change in ownership of the site. This permit is subjected by a change in ownership of the site.	

to compliance with the provisions of 15A NCAC 18E and to the conditions of this permit.

NCDHHS/DPH/EHS/OSWP

## **Harnett County Environmental Health**

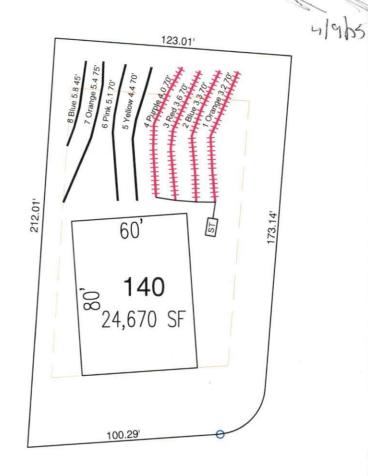
	File/Permit Number: SFD2503-0171
	CONSTRUCTION AUTHORIZATION
County: Harnett	PIN/Lot Identifier: 0642-96-8487.000
Owner: KB Home	Applicant:
Property Location: 49 Brodhead	
Facility Type: SFD (60'x49')	
	er of Occupants: 6 Other:
■ New Expansion	Repair System Relocation Change of Use
Basement? Yes	■ No Basement Fixtures? Yes No
Crawl Space? Yes	No Slab Foundation? ■ Yes No
Type of Wastewater System* Accept	oted (Initial) Accepted (Repair)
	or 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 Utiliz (if yes, please provide engineering doc	ring Low-flow Fixtures and Low-flow Technologies (S.L. 2013-413 and 2014-120)?   Yes No umentation)
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: 280 feet Trench/Bed Spacing: 9 feet on center
Trench/Bed Width: 36 inches	LTAR: .35 gpd/ft <sup>2</sup> Usable Depth to LC (Initial) <sup>x</sup> : 36 xLimiting condition
	rrected Maximum Trench/Bed Depth <sup>‡</sup> : 24 inches ** Measured on the downhill side of the trench
Pump Tank Size (if applicable): 1000	gallons Requires more than one pump? Yes No
	s 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 "Ye	es" 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 Encroachr	nent Agreement Required [Rule .0204(d)]:
Declaration of Restrictive Covenants:	☐ Yes ■ No Pre-Construction Conference Required: Yes ☐ No ☐
Management Entity Required: Yes	■ No Minimum O&M Requirements:
Conditions:	
with the attached site sketch. <u>This Co</u> Construction Authorization shall not be	re incorporated by reference into this permit and shall be met. Systems shall be installed in accordance instruction Authorization is subject to revocation if the site plan, plat, or the intended use changes. The per 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: Ol	iver Tolksdorf Expiration Date: 4/10/30
Authorized Agent's Signature:	Date: 4/10/25
	*See attached site sketch*

NCDHHS/DPH/EHS/OSWP

1645

System: ######

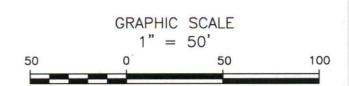
Repair:



- \*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.

System: Gravity to D-Box Lines: 1-4, (280') Accepted Status System 0.35 Soil LTAR 24" Trench Bottom

Repair: Gravity to Serial Dist. Lines: 5—8, (260') Accepted Status System 0.35 Soil LTAR 24" Trench Bottom





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 140, Birchwood Grove Subdivision Harnett County, North Carolina Job# : 3753 Drawn By : LW Date : 01/09/2024 Revision: