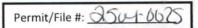
Permit/File #: 2504-0025



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

INADDOVENA	ENT DEDMIT EOD G C 1204-235/221
	ENT PERMIT FOR G.S. 130A-335(a2)
County: Harnett	
PIN/Lot Identifier: 0681-45-6137	
Issued To: Clayton Properties Group, 2521 Schieffel	lin Rd., Suite 116, Apex, NC 27502
Property Location: 18 Atherton Circle, Angier	
Subdivision (if applicable) Cambridge Reserve	Lot #: Block: Section:
LSS Report Provided: Yes No No	
If yes, name and license number of LSS: John Kase #132	23
Facility Type: Single Family Residence	System Relocation Change of Use
Number of bedrooms: 4 Number of Occupants: <8	Other:
Design Wastewater Strength: Domestic	☐ High Strength ☐ Industrial Process Wastewater
Proposed Design Daily Flow: 480 GPD	Proposed LTAR (Initial): 0.4 Proposed LTAR (Repair): 0.4
Proposed Wastewater System Type*: Ilb-Gravity to 25% reduced to 25	action Accepted System (Initial) Pump Required: ☐ Yes ■ No ☐ May be required
Proposed Wastewater System Type*: Ilb-Gravity to 25% reduce	action Accepted System (Repair) Pump Required: Yes No May be required
*Please include system classification for proposed wastewo	ater 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 plan)
Fill System (Repair): Yes No If yes, specify: New	w Existing (when adding more than 6 inches of fill to system area provide a fill plan)
Usable Depth to LC (Initial) ^x : 42	Usable Depth to LC (Repair) ^x : 42 x Limiting Condition
Max. Trench Depth (Initial)‡: 18 Max. Tren	nch Depth (Repair) [‡] : 18 **Measured on the downhill side of the trench
Artificial Drainage Required: Yes No If yes, please	e 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 pursuar	nt to GS 130A-334(13a)] No expiration [plat submitted pursuant to GS 130A-334(7a)]
Permit conditions: Install as per detail sheet and map. Do not disturb, compact, rut or cut any so Gravity to serial distribution may be substituted in lieu of distribution	oil within the septic drainfield area. Ensure 6 inches approved fill cover is maintained over system after installation. n box.
Licensed Soil Scientist Print Name: John Kase	S 0 80 8 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2

See attached site sketch





This Section for Local Health Department Use Only

	550	. 0
	Initial submittal received:	5 by CC
	Date	Initials
G.S. 130A-335(a3) states the following	ng:	
department, the common form developed by within five business days of receiving the appi Permit includes all of the required component shall notify the applicant of the components re department to cure the deficiencies in the Impair is complete within five business days after the	the Department, and a soil evaluation pursuant to su lication, conduct a completeness review of the submit is. If the local health department determines that the needed to complete the Improvement Permit. The app provement Permit. The local health department shall to local health department receives the additional info in, the applicant may treat the failure to act as a dete	ement Permit application, the permit fee charged by the local health subsection (a2) of this section, the local health department shall, mittal. A determination of completeness means that the Improvement he Improvement Permit is incomplete, the local health department applicant may submit additional information to the local health all make a final determination as to whether the Improvement Permit information from the applicant. If the local health department fails to extermination of completeness. The Department shall develop a
The review for completeness of this Permit is determined to be:	Improvement Permit was conducted in ac	accordance with G.S. 130A-335(a3). This Improvement
☐ Incomplete (If box is checked, in	nformation in this section is required.)	
The following items are missing:		
Copies of this were sent to the LSS a	nd the Applicant on	
State Authorized Agent:		Date:
Complete		
State Authorized Agent:	for KEHS	Date:
attached here. The issuance of this for checking with appropriate gove plat, or the intended use changes. permit is subject to compliance wit	permit in no way guarantees the issuance rning bodies in meeting their requirement. The Improvement Permit shall not be affect the provisions of 15A NCAC 18E and to the provisions of 15A NCAC 18E.	
any liabilities, duties, and responsib	The state of the s	departments shall be discharged and released from n law from any claim arising out of or attributed to geologist pursuant to GS 130A-335(a2).
Improvement Permit Expiration Da	te: 5 - 9 - 3 <i>9</i>	

See attached site sketch



Permit/File #: 2504-6025

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

County: Harnet	tt	Pre-Construction Conference Required: Yes ☐ No ■					
PIN/Lot Identifie	r:0681-45-6137						
Issued To: Clay	ton Properties Gro	up, 2521 Schieffelin Rd., Suite 116, Apex, NC 27502	_				
Property Locatio	n: 18 Atherton Circ	cle, Angier	_				
AOWE/PE Plans/	Evaluations Provided	: Yes No If yes, name and license number of AOWE/PE: John Kase #10060E	_				
Facility Type: Si	ngle Family Reside	ence	_				
Number of bedro	ooms: 4 Numb	per of Occupants: <8 Other:					
■ New	☐ Expansion	Repair System Relocation Change of Use					
Basement?	Yes	■ No Basement Fixtures? Yes ■ No					
		No Slab Foundation? ■ Yes No					
Type of Wastew	ater System*IIb- Gra	avity to 25% Reduction Accepted System (Initial) IIb-Gravity to 25% Reduction Accepted System (Repa	ir)				
*Please include s	system classification f	for proposed wastewater system types in accordance with Rule .1301 Table XXXII					
Design Daily Flow	w: <u>480</u>	GPD Wastewater Strength: Domestic High Strength Industrial Process WW					
	4-120 Section 53, Eng	ineering Design Utilizing Low-flow Fixtures and Low-flow Technologies? Yes No					
Effluent Standar	d: DSE HS	E NSF/ANSI 40 TS-I TS-II RCW					
Type of Water So	upply: Private well	Public well Shared well Municipal Supply Spring Other:	_				
Installation Requ	uirements/Condition	<u>s</u>					
		Total Trench/Bed Length: 300 feet Trench/Bed Spacing: 9 feet on center					
Trench/Bed Wid	th: 36 inches	LTAR: 0.4 gpd/ft ² Usable Depth to LC (Initial) ^x : 42 xLimiting condition					
Soil Cover: 6	_inches Slope Co	prrected Maximum Trench/Bed Depth [‡] : 18 inches * Measured on the downhill side of the trench					
Pump Tank Size	(if applicable): NA	gallons Requires more than 1 pump? Tyes No					
Pump Requirem	ents: ft. TDH	vs GPM Grease Trap Size (if applicable): gallons					
Distribution Met	thod: 🗌 Serial 🔳	D-Box or Parallel Pressure Manifold(s) LPP Other:	_				
Artificial Drainag	ge Required: Yes	No If yes, please specify details:	_				
Legal Agreemen	ts (If the answer is "Y	es" to any type of legal agreements, please attach a copy of the agreement.)					
Multi-party Agre	ement Required [.020	04(g)]: ☐ Yes ■ No Declaration of Restrictive Covenants: ☐ Yes ■ No					
		ment Agreement Required [.0301(b)]:					
Management En	tity Required: Yes	No Minimum O&M Requirements: Owner to maintain wastewater system in accordance with rule .1301	-				
Ensure 6 inches a Gravity to serial d	il sheet and map. Do not approved soil fill cover ov istribution may be used in	t disturb, compact, rut or cut any soil within the septic drainfield area. ver system after installation and maintained. In lieu of distribution box. verstem design without approval of the AOWE.					
The requiremen	ts of 15A NCAC 18E a	are incorporated by reference into this permit and shall be met. Systems shall be installed in accordance	_				
with the attache Construction Au	ed site sketch. <u>This Co</u> thorization shall not	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. Date: 3/31/2025 Certification	е				
AOWE/PE Print I	Name: John Kase	I/	1				
AOWE/PE Signat	ture:	Date: 3/31/2025 Certification	NER LER				
	This AQWE/PI	E submittal is pursuant to and meets the requirements of G.S. 130A-335(a2) and (a5) Number 10060E	111111				
	AOWE/PE Signature: This AQWE/PE submittal is pursuant to and meets the requirements of G.S. 130A-335(a2) and (a5) *See attached site sketch* NCDHHS/DPH/EHS/OSWP Date: 3/31/2025 Certification Number 10060E *See attached site sketch*						
NCDHHS/DPH/EHS	5/OSWP	4 Revised January 20 Form A2CF-2					





This Section for Local Health Department Use Only

	Initial submittal received: 5.5	.25_by_	RC	
	De	ate I	nitials	
G.S. 130A-335(a5) states the fo	llowing:			
Improvement Permit and Construction Department, and any necessary signed engineer or a person certified pursuant department shall, within five business of the Construction Authorization or Improduce that the Construction Authorization of the components needed to additional information to the local health Authorization. The local health department fails to act within any pericapply for the building permit for the production by the local health departicensed engineer submitting the evaluation or Improvement Permit of engineer, the local health departments.	Authorization, or an Improvement Permit and C Authorization application together, the permit I and sealed plans or evaluations conducted by It to Article 5 of Chapter 90A of the General Stat days of receiving the application, conduct a con- covement Permit and Construction Authorization orization or Improvement Permit and Construct to complete the Construction Authorization or In 11th department to cure the deficiencies in the Con- ment shall make a final determination as to who usiness days after the local health department and set out in this subsection, the applicant may poject upon the decision of completeness of the retiment or if the local health department fails to attion pursuant to this subsection may request to and Construction Authorization for cause. Upon shall suspend or revoke the Construction Autho- p a common form for use as the Construction A	fee charged by the local I a person licensed pursuar utes as an Authorized On apleteness review of the s in includes all of the requi- tion Authorization is incor- aprovement Permit and Co- construction Authorization ether the Construction Au- treat the failure to act as Construction Authorization act within five business a that the local health depa a written request of the Au- trization or Improvement	health department, the coming to Chapter 89C of the Gene-Site Wastewater Evaluator, submittal. A determination of the components. If the local implete, the local health department department or Improvement Permit and the component of the applican or Improvement formation from the applican or Improvement Permit and the component of the applican or Improvement Permit and the component of the applican or Improvement Permit and the applicant Permit P	non form developed by the eral Statutes as a licensed the local health f completeness means that health department rtment shall notify the he applicant may submit a Construction Permit and Construction t. If the local health eness. The applicant may ad Construction Wastewater Evaluator or e Construction er Evaluator or licensed
The review for completeness of	f this Construction Authorization was	conducted in accord	dance with G.S. 130A-3	35(a5). This
Construction Authorization is d	etermined to be:			
☐ Incomplete (If box is check	ed, information in this section is requ	ired.)		
The following items are missing	g;			
Copies of this were sent to the	AOWE/PE and the Applicant on	Date		
State Authorized Agent:			Date:	
		3133		
Complete				
State Authorized Agent:	IN REHS	-	_ Date of Issuance: _	5-9-23
This Construction Authorization attached here. This Construction Construction Authorization shat to compliance with the provision The Department, the Department, any liabilities, duties, and respiplans, evaluations, preconstructive General Statutes as a licent Authorized On-Site Wastewater	on is issued pursuant to G.S. 130A-333 on Authorization is subject to revoca all not be affected by a change in owions of the Laws and Rules for Sewag ent's authorized agents, and the local consibilities imposed by statute or in action conference findings, submittals used engineer or a person certified puer Evaluator in GS 130A-335(a2), (a5)	tion if the site plan, nership of the site. Treatment and Distriction al health department common law from a s, or actions from a pursuant to Article 5 of Jand (a7). The Department	plat, or the intended This Construction Aut sposal and to the cond ats shall be discharged any claim arising out of person licensed pursual of Chapter 90A of the Cartment, the Department	use changes. The horization is subject litions of this permit. and released from f or attributed to ent to Chapter 89C of General Statutes as an ent's authorized
	rule, including the issuance of the operation Date: 5 - 9 - 39			

See attached site sketch

