



HARNETT COUNTY ENVIROMENTAL HEALTH

File/Permit #: SFD2505-0011

CDP #:

IMPROVEMENT PERMIT (IP)

☒ New☐ Expansion☐ Repair☐ System Relocation☐ Change of Use

Owner: Glenwood Homes

Applicant:

Property Location: 67 Fern Ridge

PIN/Lot Identifier: 9556-89-8984

Subdivision: Carolina Seasons

Lot #: 2 Block: Section:

Facility Type: SFD (34'x47')

Number of bedrooms: 3

Number of Occupants: 6

Other:

Design Daily Flow: 360 GPD

LTAR (Initial): .8 gpd/ft²LTAR (Repair): .8 gpd/ft²

Wastewater System Type: Pump to Conventional

(Initial)

Pump Required: ☒ Yes ☐ No ☐ May be required

Usable Depth to Limiting Condition (Initial): 42

Wastewater System Type: Pump to Conventional

(Repair)

Pump Required: ☒ Yes ☐ No ☐ May be required

Usable Depth to Limiting Condition (Repair): 42

Effluent Standard: ☒ DSE ☐ HSE ☐ Other: Type of Water Supply: ☐ Private well ☒ Municipal Supply ☐ Other:

Permit conditions:

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.

Authorized Agent's Printed Name: Oliver Tolsdorf

Date: 05/21/2025

Authorized Agent's Signature:

Expiration Date: 05/21/2030

CONSTRUCTION AUTHORIZATION (CA)

☒ New☐ Expansion☐ Repair☐ System Relocation☐ Change of Use

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LTAR: .8 gpd/ft²Effluent Standard: ☒ DSE ☐ HSE ☐ Other: Type of Water Supply: ☐ Private well ☒ Municipal Supply ☐ Other:

Installation Requirements/Conditions

Wastewater System Type: Conventional

Pump Required: ☒ Yes ☐ No ☐ May be required

Septic Tank Size: 1000 gallons

Total Trench Length: 150 feet

Trench Spacing: 9 feet on center

Pump Tank Size: 1000 gallons

Maximum Trench Depth: 24 inches

Soil Cover: 6 inches

Trench Width: 36 inches

Distribution Method: ☒ Serial ☐ D-Box or Parallel ☐ Pressure Manifold ☐ Other:Artificial Drainage Required: Yes ☐ No ☒ If yes, please specify details:Management Entity Required: ☐ Yes ☒ No Minimum O&M Requirements:

Permit conditions:

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.

Authorized Agent's Printed Name: Oliver Tolsdorf

Date: 05/21/25

Authorized Agent's Signature:

Expiration Date: 05/21/2030

Owner/Legal Representative Signature:

Date:

*See attached site sketch

Harnett County Environmental Health

SITE SKETCH

PIN 9556-89-8984

Permit Number SFD2505-0011

Glenwood Homes

Carolina Seasons lot 2

Applicant's Name

Subdivision/Section/Lot Number

5/21/25

Authorized State Agent

Date

System components represent approximate contours only. The contractor must flag the system prior to beginning the installation to ensure that the proper grade is maintained.

Scale = _____

