Harnett COUNTY NORTH CAROLINA

HARNETT COUNTY ENVIROMENTAL HEALTH

File/Permit #: SFD2505-0098

CDP #: _____

IMPROVEMENT PERMIT (IP)

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

Owner: Demetrius Cates Applicant: Tim Johnson

Property Location: 93 Dewey Ln (SR 2036) PIN/Lot Identifier: 0546-76-9461

Subdivision: _____ Lot #: _____ Block: _____ Section: _____

Facility Type: 52'x72' SFD Number of bedrooms: 3 Number of Occupants: 6 Other: _____

Design Daily Flow: 360 GPD LTAR (Initial): .4 gpd/ft² LTAR (Repair): .4 gpd/ft²

Wastewater System Type: 25% reduction (Initial)

Pump Required: ☒ Yes ☐ No ☐ May be required Usable Depth to Limiting Condition (Initial): 34

Wastewater System Type 25% reduction (Repair)

Pump Required: ☒ Yes ☐ No ☐ May be required Usable Depth to Limiting Condition (Repair): 34

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: Mark Osborne REHS Date: 07/02/2025

Authorized Agent's Signature: Mark Osborne REHS Expiration Date: 07/02/2030

CONSTRUCTION AUTHORIZATION (CA)

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

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

Installation Requirements/Conditions

Wastewater System Type: 25% reduction Pump Required: ☐ Yes ☐ No ☐ May be required

Septic Tank Size: 1000 gallons Total Trench Length: 225 feet Trench Spacing: 9 feet on center

Pump Tank Size: 1000 gallons Maximum Trench Depth: 20 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: Mark Osborne REHS Date: 07/02/25

Authorized Agent's Signature: Mark Osborne REHS Expiration Date: 07/02/2030

Owner/Legal Representative Signature: _____ Date: _____

***See attached site sketch**

SITE SKETCH

PIN 0546-76-9461 Permit Number SFD2505-0098

Applicant's Name
Mark Osborne REHS
Authorized State Agent

Subdivision/Section/Lot Number
07/02/2025
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 = NTS