

Owner/Legal Representative Signature:

HARNETT COUNTY ENVIROMENTAL HEALTH

NORTH CAROL: VA	File/Permit #: SFD2505-0184
IMPROVEM	ENT PERMIT (IP) CDP #:
■ New Expansion Repair Owner: Dream Finders Homes LLC	
Property Location: 199 Horse Trot Ln	0557 57 5470
Subdivision: Watsons Ridge	
Facility Type: 38'x44' SFD Number of bedrooms: 4	Lot #: 38 Block: Section: Number of Occupants: 8 Other:
Design Daily Flow: 480 GPD LTAR (Initial): .6	gpd/ft² LTAR (Repair): .6 gpd/ft²
Wastewater System Type: 25% reduction	(Initial)
Pump Required: Yes No May be required	Jsable Depth to Limiting Condition (Initial): 40
	(Repair)
Pump Required: Yes No May be required	
Effluent Standard: DSE HSE Other: Type of	of Water Supply: Private well Municipal Supply Other:
Permit conditions:	
remit conditions.	
requirements. This permit is subject to revocation if the site plan, plat, or the intended u	mit holder is responsible for checking with appropriate governing bodies in meeting their se 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 con	Additional Control of the Control of
Authorized Agent's Printed Name: Mark Osborne REHS Authorized Agent's Signature:	Date: 06/27/2030
Authorized Agent's Signature:	Expiration Date: 06/27/2030
CONSTRUCTION	AUTHORIZATION (CA)
■ New □ Expansion □ Repair	
Owner: Dream Finders Homes LLC	
Property Location: 199 Horse Trot Ln	PIN/Lot Identifier: 9557-57-5173
Subdivision: Watsons Ridge	Lot #: 38 Block: Section:
Facility Type: 38'x44' SFD Number of bedrooms: 4	Lot #: 38 Block: Section: Number of Occupants: 8 Other:
Design Daily Flow: 480 GPD LTAR: .6	pd/ft²
	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: 200	feet
Pump Tank Size: 1000 gallons Maximum Trench Depth: 26	6 inches Soil Cover: 6 inches
Trench Width: 36 inches Distribution Method: \square Se	rial D-Box or Parallel Pressure Manifold Other:
Artificial Drainage Required: Yes 🔲 No 🔳 If yes, please specify de	etails:
Management Entity Required: Yes No Minimum O&M Requ	irements:
Permit conditions:	
	hall be met. Systems shall be installed in accordance with the attached site sketch. <u>This</u>
<u>Construction Authorization is subject to revocation if the site plan, plat, or the intended</u> the site. This Construction Authorization is subject to compliance with the provisions of	use changes. The Construction Authorization shall not be affected by a change in ownership of 15A NCAC 18E, or 15A NCAC 18A .1900, as applicable, and to the conditions of this permit.
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 15A NCAC 18E, or 15A NCAC 18A .1900, as applicable, and to the conditions of this permit.

*See attached site sketch

Date: ___

SITE SKETCH

9557-57-5173

Authorized State Agent

Permit Number SFD2505-0184

Dream Finders Homes LLC

Applicant's Name Mark Osborne REHS Watsons Ridge 38

Subdivision/Section/Lot Number 06/27/2025

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.

