

HARNETT COUNTY ENVIROMENTAL HEALTH

IMPROVEMEN	T PERMIT (IP) CDP #:
New Expansion Repair	System Relocation Change of Use
Owner: KB Homes	Applicant: KB Homes
Property Location: 35 Elyse Overlook CT	PIN/Lot Identifier: 0539-97-4628
Subdivision: Elyse Meadows	
Facility Type: 5/ 'x 50' SFD Number of bedrooms: 3	Number of Occupants: 6 Other:
Design Daily Flow: 360 GPD LTAR (Initial): .35	
2-8/	(Initial)
Pump Required: ✓ Yes No May be required Usable	
Wastewater System Type 25% reduction	(Repair)
Pump Required: ☑ Yes ☐ No ☐ May be required Usabl	e Depth to Limiting Condition (Repair):
Effluent Standard: DSE HSE Other: Type of Wa	ter Supply: Private well Municipal Supply Other:
Permit conditions:	
The issuance of this permit in no way guarantees the issuance of other permits. The permit ho requirements. This permit is subject to revocation if the site plan, plat, or the intended use charles permit is subject to compliance with the provisions of 15A NCAC 18E and to the condition	inges. The Improvement Permit shall not be affected by a change in ownership of the site.
Authorized Agent's Printed Name: MARL Osborns RE	M Date: 7-18-25
Authorized Agent's Signature: Mal Mach	Expiration Date: 7-18-30
Septic Tank Size:	Number of Occupants: 6 Other:
Management Entity Required: Yes Mo Minimum O&M Requirem	ents:
Permit conditions:	
The requirements of 15A NCAC 18E are incorporated by reference into this permit and shall be Construction Authorization is subject to revocation if the site plan, plat, or the intended use the the site. This Construction Authorization is subject to compliance with the provisions of 15A N	<u>ranges.</u> The Construction Authorization shall not be affected by a change in ownership of ICAC 18E, or 15A NCAC 18A .1900, as applicable, and to the conditions of this permit.
Authorized Agent's Printed Name: MARL Usborne Authorized Agent's Signature: Mal RE	Date: /-/5-23
Owner/Legal Representative Signature:	Date:

*See attached site sketch

Harnett County Environmental Health

SITE SKETCH

DIN	0539	-	97-	4	628
PIN	0777	-	1/-	7	668

Permit Number _ SFD 2506-0081

KB Homes

Elysa Medows 59
Subdivision/Section/Lot Number

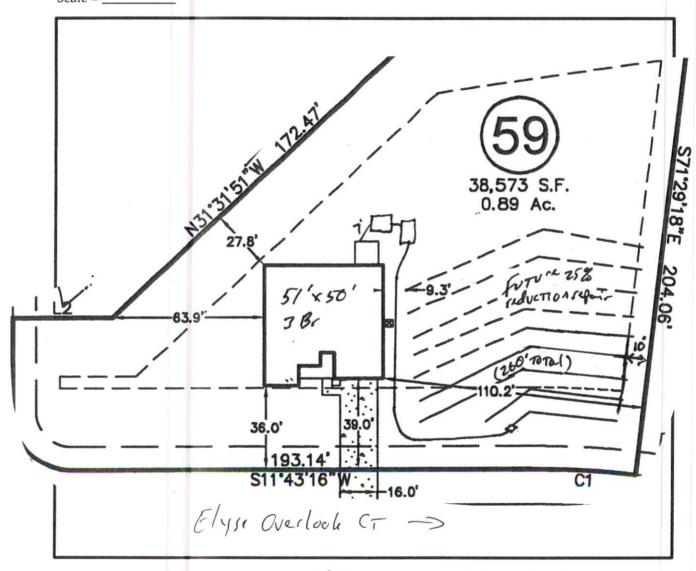
Applicant's Name Mark Osborne REHS

Date

Authorized State Agent

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



- Keep supply line & From House And least Septic System within property line setbacks