



HARNETT COUNTY ENVIROMENTAL HEALTH

File/Permit #: SFD2507-0024

CDP #: _____

IMPROVEMENT PERMIT (IP)

☒ New☐ Expansion☐ Repair☐ System Relocation☐ Change of UseOwner: Galt Land DevelopmentApplicant: Galt Land DevelopmentProperty Location: 61 Mahogany Ct (SR 1323)PIN/Lot Identifier: 9567-21-1700Subdivision: Magnolia HillsLot #: 21

Block: _____

Section: _____

Facility Type: 54'x47'SFDNumber of bedrooms: 4Number of Occupants: 8

Other: _____

Design Daily Flow: 480 GPDLTAR (Initial): .6 gpd/ft²LTAR (Repair): .6 gpd/ft²Wastewater System Type: 25% reduction

(Initial)

Pump Required: ☒ Yes ☐ No ☐ May be requiredUsable Depth to Limiting Condition (Initial): 48Wastewater System Type: 25% reduction

(Repair)

Pump Required: ☒ Yes ☐ No ☐ May be requiredUsable Depth to Limiting Condition (Repair): 48Effluent 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 REHSDate: 07/23/2025

Authorized Agent's Signature: _____

Expiration Date: 07/23/2030

CONSTRUCTION AUTHORIZATION (CA)

☒ New☐ Expansion☐ Repair☐ System Relocation☐ Change of UseOwner: Galt Land DevelopmentApplicant: Galt Land DevelopmentProperty Location: 61 Mahogany Ct (SR 1323)PIN/Lot Identifier: 9567-21-1700Subdivision: Magnolia HillsLot #: 21

Block: _____

Section: _____

Facility Type: 54'x47'SFDNumber of bedrooms: 4Number of Occupants: 8

Other: _____

Design Daily Flow: 480 GPDLTAR: .6 gpd/ft²Effluent Standard: ☒ DSE ☐ HSE ☐ Other: _____Type of Water Supply: ☐ Private well ☒ Municipal Supply ☐ Other: _____Installation Requirements/ConditionsWastewater System Type: 25% reductionPump Required: ☒ Yes ☐ No ☐ May be requiredSeptic Tank Size: 1000 gallonsTotal Trench Length: 200 feetTrench Spacing: 9 feet on centerPump Tank Size: 1000 gallonsMaximum Trench Depth: 28 inchesSoil Cover: 6 inchesTrench Width: 36 inchesDistribution 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 REHSDate: 07/23/25

Authorized Agent's Signature: _____

Expiration Date: 07/23/2030

Owner/Legal Representative Signature: _____

Date: _____

*See attached site sketch

Harnett County Environmental Health

SITE SKETCH

PIN 9567-21-1700

Permit Number SFD2507-0024

Galt Land Development

Magnolia Hills 21

Applicant's Name

Subdivision/Section/Lot Number

Mark Osborne REHS

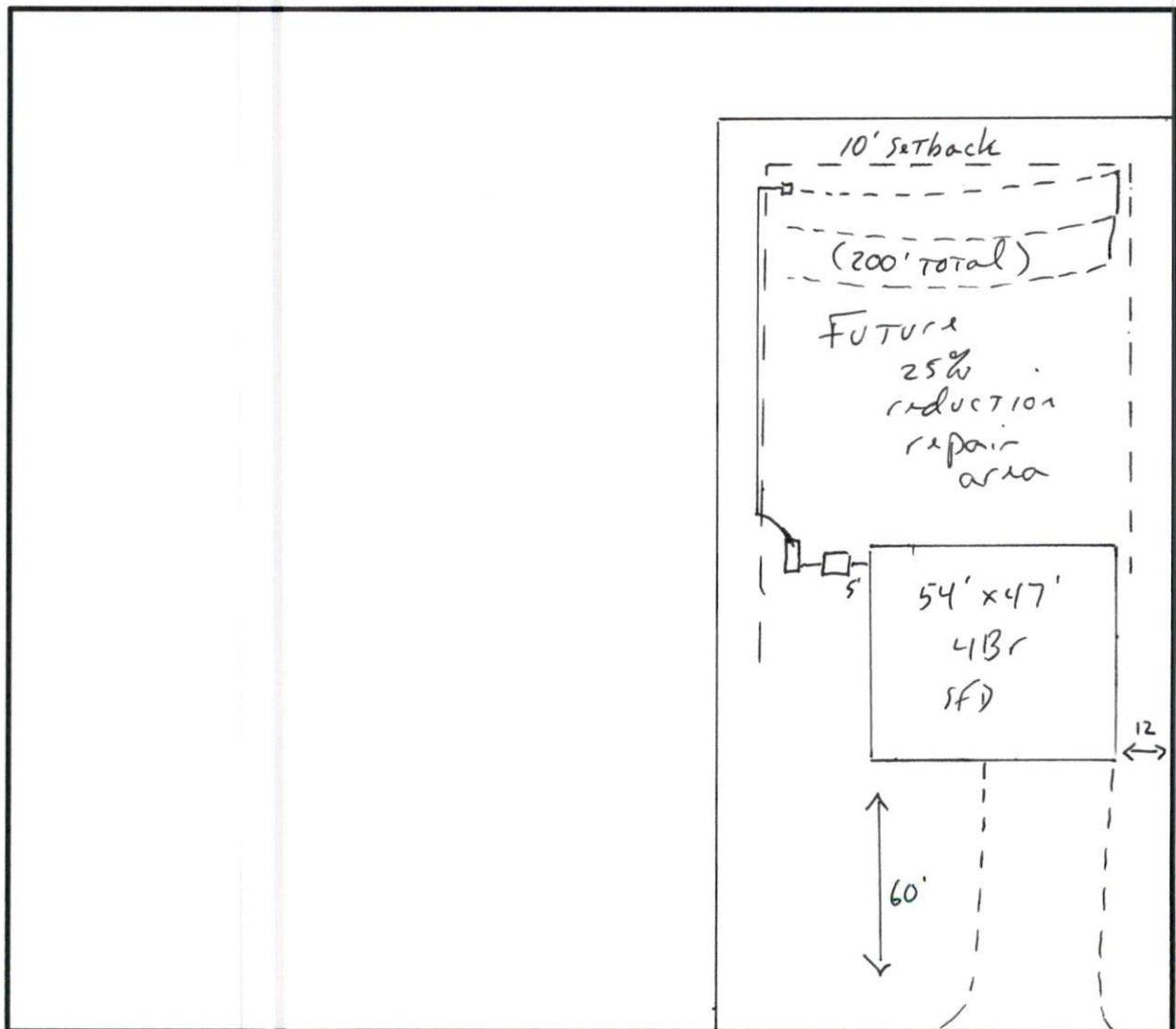
07/23/2025

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 = NTS



← Mahogany Ct →