

HARNETT COUNTY ENVIROMENTAL HEALTH

NORTH CAROLI	1		File/Permit #: SFD2507-0101
	IMP	ROVEMEN	IT PERMIT (IP) CDP #:
New Owner: HEDGEPETH JAMES RA	Expansion	Repair	System Relocation Change of Use Applicant: SEVEN MAGNOLIAS CONSTRUCTION
Property Location: 558 NC 55 W CC		1	PIN/Lot Identifier: 0690-78-6961.000
	7110,110 2102	-	
Subdivision: SFD 53' x 42'		. 2	Lot #: 2 Block: Section:
			_ Number of Occupants: 4 Other:
Wastewater System Type: 25% Redu			_ gpd/ft ² LTAR (Repair): <u>.3</u> gpd/ft ²
			(Initial)
			le Depth to Limiting Condition (Initial): 40"
Wastewater System Type 25% Reduc			
			ole Depth to Limiting Condition (Repair): 40"
Effluent Standard: DSE HSE	Other:	Type of W	ater Supply: Private well Municipal Supply Other:
Permit conditions: No Foundation or Gutter Drains to be Directed Towards S No Cutting or Grading of Soil in Septic or Septic Repair A Use Either Ductile Iron or Double Walled Corrugated Pipe	rea.	der Drive Way.	
requirements. <u>This permit is subject to revocation</u> This permit is subject to compliance with the prov	if the site plan, plat, or disions of 15A NCAC 188	r the intended use ch	NO 20 20 ACC 1 ACC
Authorized Agent's Printed Name: Rer	Levocz		Date: 08/14/2025
Authorized Agent's Signature:	Tru	RE115	Expiration Date: 08/14/2030
■ New Owner: HEDGEPETH JAMES RA	Expansion	Repair	JTHORIZATION (CA) ☐ System Relocation ☐ Change of Use Applicant: SEVEN MAGNOLIAS CONSTRUCTION
Property Location: 558 NC 55 W CC		1	PIN/Lot Identifier: 0690-78-6961.000
			2
Subdivision: SFD 53' x 42'		. 2	Lot #: 2 Block:
		gpd/f	
Design Daily Flow: 240 GPD			
Effluent Standard: DSE HSE	other:	Type of w	ater Supply: Private well Municipal Supply Other:
Installation Requirements/Conditions Wastewater System Type: 25% Redu	ction System		Duran Basuiradi
Septic Tank Size: 1,000 gallons		and 200'	Pump Required: Yes No May be required. Trench Spacing: 9' feet on center
Pump Tank Size: 1,000 gallons			
Trench Width: 36" inches			■ D-Box or Parallel Pressure Manifold Other: 2 - 100' Lin
Artificial Drainage Required: Yes			
Management Entity Required: Yes			
		n odivi nequiren	Terror.
Permit conditions: No Foundation or Gutter Drains to be Directed Towards & No Cutting or Grading of Soil in Septic or Septic Repair A Use Either Ductile Iron or Double Walled Corrugated Pipe	rea.	der Drive Way.	
<u>Construction Authorization is subject to revocation</u> the site. This Construction Authorization is subject	n if the site plan, plat, o t to compliance with th	or the intended use cl	the met. Systems shall be installed in accordance with the attached site sketch. <u>This hanges.</u> The Construction Authorization shall not be affected by a change in ownership of NCAC 18E, or 15A NCAC 18A .1900, as applicable, and to the conditions of this permit.
Authorized Agent's Printed Name:			Date: 08/14/25
Authorized Agent's Signature:	7	LEHS	Expiration Date: 08/14/2030
Owner/Legal Representative Signature:			Date:

SITE SKETCH

PIN 0690-78-6961.000

Permit Number SFD2507-0101

SEVEN MAGNOLIAS CONSTRUCTION

Applicant's Name Ren Levocz

Authorized State Agent

Lot 2

Subdivision/Section/Lot Number 08/14/2025

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.

