

## HARNETT COUNTY ENVIROMENTAL HEALTH

HOK II CK				File/Permit #: SFD2508-0064
	IMI	PROVEME	NT PERMIT (IP)	CDP #:
■ New	Expansion	Repair	System Relocation	☐ Change of Use
Owner: Smith Douglas Homes			Applicant: Smith Doug	glas Homes
Property Location: 104 Smith Farms Dr (NC HWY 27)			PIN/Lot Identifier: 0528-11-4626	
Subdivision: Reedy Branch			Lot #: 63	Block: Section:
Facility Type: 38'x58' SFD	Number of be	edrooms: 3	Number of Occupants: 6	Block: Section:
Design Daily Flow: 360 GPD LTAR (Initial): .35 gpd/ft <sup>2</sup> LTAR (Repair): .35 gpd/ft <sup>2</sup>				
Wastewater System Type: 25% reduction (Initial)				
Pump Required: Yes No May be required Usable Depth to Limiting Condition (Initial): 48				
Wastewater System Type 25% reduction (Repair)				
Pump Required: Yes No May be required Usable Depth to Limiting Condition (Repair): 48				
Effluent Standard: DSE HSE	Other:	Type of W	/ater 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: Ma	rk Osborne			Date: 09/03/2025
Authorized Agent's Printed Name: Ma	de de	- Rélt		Expiration Date: 09/03/2030
CONSTRUCTION AUTHORIZATION (CA)				
■ New	Expansion		System Relocation	
Owner: Smith Douglas Homes			the state of the s	Change of Use
Owner: Smith Douglas Homes  Applicant: Smith Douglas Homes  Property Location: 104 Smith Farms Dr (NC HWY 27)  PIN/Lot Identifier: 0528-11-4626				
Subdivision: Reedy Branch	,		1 at 4. 63	N-1- 6-11
Facility Type: 38'x58' SFD	Number of he	drooms: 3	Number of Occupants 6	Section:   Section:   Other:
Design Daily Flow: 360 GPD	ITAR:	35gpd/f	- Number of Occupants:	Other:
Effluent Standard: DSE HSE Other: Type of Water Supply: Private well Municipal Supply Other:				
Installation Requirements/Conditions			ater suppry. Trivate well	wunicipal supply Other:
Wastewater System Type: 25% reduc	ction		Pump Require	ed: Yes No May be required
Septic Tank Size: 1000 gallons		ngth: 260	Pump Require	9 feet on center
Pump Tank Size: 1000 gallons	Maximum Trend	ch Depth: 28	inches Soil Cover: 6	inches
Trench Width: 36 inches	Distribution Me	thod: Serial	D-Box or Parallel	Pressure Manifold Other
Artificial Drainage Required: Yes	No If yes, plea	se specify details	::	- Carlett
Artificial Drainage Required: Yes No If yes, please specify details:				
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  Date: 09/03/25  Expiration Date: 09/03/2030				
Authorized Agent's Printed Name: Mai	k Osborne	/		Date: 09/03/25
Authorized Agent's Signature:	14h de	REHS		Expiration Date: 09/03/2030
Owner/Legal Representative Signature:			Date:	

\*See attached site sketch

## SITE SKETCH

PIN 0528-11-4626

Permit Number SFD2508-0064

Smith Douglas Homes

Applicant's Name Mark Osborne Reedy Branch

Subdivision/Section/Lot Number 09/03/2025

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.

