

HARNETT COUNTY ENVIROMENTAL HEALTH

NORTH CART				File/Permit #: SFD2509-0057
	IMI	PROVEMEN	IT PERMIT (IP)	CDP #:
New Owner: Smith Douglas Homes	Expansion	Repair	System Relocation Applicant: Smith Doug	1
Owner: Smith Douglas Homes Applicant: Smith Dou Property Location: 81 Smith Farms Dr (NC 27W) PIN/Lot Identifier: 05				
Subdivision: Reedy Branch			Lot #. 4	Block: Section:
Facility Type: 34'x37' SFD	Number of be	edrooms: 3	Number of Occupants: 6	Other:
Design Daily Flow: 360 GPD	LTAR (Ir	nitial): .4	gpd/ft ² LTAR (Repair):	.4 gpd/ft²
Wastewater System Type: 25% redu				
Pump Required: Yes No No				n (Initial): 14
Wastewater System Type 25% reduction (Repair)				
Pump Required: Yes No No				n (Repair): 14
				■ Municipal Supply □Other:
Permit conditions:				
This permit is subject to compliance with the pro	n if the site plan, plat, o visions of 15A NCAC 18	or the intended use ch BE and to the conditio	nanges. The Improvement Permit shans of this permit.	all not be affected by a change in ownership of the site.
Authorized Agent's Printed Name: Ma	rk Osborne RE	HS		
Authorized Agent's Signature:	al de	- REI	15	Expiration Date: 10/03/2030
Owner: Smith Douglas Homes Property Location: 81 Smith Farms	Expansion	Repair	JTHORIZATION (CA System Relocation Applicant: Smith Doug	Change of Use
				Block: Section:
Facility Type: 34'x37' SFD	Number of he	edrooms: 3	Number of Occupants: 6	Block: Section:
Design Daily Flow: 360 GPD	ITAR: ·	4gpd/f	t ²	other.
Effluent Standard: DSE HSE				Municipal Supply Other:
Installation Requirements/Conditions				
Wastewater System Type: 25% redu	ction		Pump Requir	red: Yes No May be required
Septic Tank Size: 1000 gallons		ngth: 225		
Pump Tank Size: 1000 gallons				
Trench Width: 36 inches				
Artificial Drainage Required: Yes				
Management Entity Required: Yes				
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. <u>This Construction Authorization is subject to revocation if the site plan, plat, or the intended use changes.</u> 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: Ma	rk Osborne RE	HS		Date: 10/03/25 Expiration Date: 10/03/2030
Authorized Agent's Signature:	let the	-NEI	45	Expiration Date: 10/03/2030
Owner/Legal Representative Signature	:		Date:	

*See attached site sketch

SITE SKETCH

_{PIN} 0528-11-6923

Permit Number SFD2509-0057

Smith Douglas Homes

Applicant's Name Mark Osborne REHS

Authorized State Agent

Reedy Branch 4

Subdivision/Section/Lot Number 10/03/2025

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.

