

HARNETT COUNTY ENVIROMENTAL HEALTH

NORTH CAROL	11		File/Permit #: SFD2509-0062	
	IMF	PROVEMEN	NT PERMIT (IP) CDP #:	
New Owner: Galt Land Development	Expansion	Repair	System Relocation Change of Use Applicant: Galt Land Development	
Property Location: 18 Myrtle Oak D	r (SR 1323)		PIN/Lot Identifier: 9567-12-0083	
Subdivision. Magnolia Hills			Lot #. 34 Block: Section:	
Facility Type: 54'x70' SFD	Number of he	edrooms: 4	Number of Occupants: 8 Other:	
Design Daily Flow: 480 GPD	LTAR (Ir	nitial): .6	gpd/ft² LTAR (Repair):6gpd/ft²	
Wastewater System Type: 25% reduction (Initial)				
Pump Required: Yes No May be required Usable Depth to Limiting Condition (Initial): 48				
Wastewater System Type 25% reduc			(Repair)	
Pump Required: Yes No			ole Depth to Limiting Condition (Repair): 48	
Effluent Standard: 🔳 DSE 🔲 HSE	Other:	Type of W	/ater Supply: Private well Municipal Supply Other:	
Permit conditions:				
requirements. This permit is subject to revocation	n if the site plan, plat, o	or the intended use ci	nolder is responsible for checking with appropriate governing bodies in meeting their <u>hanges.</u> The Improvement Permit shall not be affected by a change in ownership of the	
This permit is subject to compliance with the pro				
Authorized Agent's Printed Name: Ma		DEHC	Expiration Date: 10/03/2030	
Authorized Agent's Signature:		REID	Expiration Date: 10/05/2000	
	CONSTR	UCTION AL	JTHORIZATION (CA)	
■ New	Expansion	Repair	☐ System Relocation ☐ Change of Use	
Owner: Galt Land Development			Applicant: Galt Land Development	
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Subdivision: Magnolia Hills			Lot #: 34 Block: Section:	
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Design Daily Flow: 480 GPD	LTAR: _	6 gpd/	ft²	
Effluent Standard: 🔳 DSE 🔲 HSE	Other:	Type of W	/ater Supply: Private well Municipal Supply Other:	
Installation Requirements/Conditions				
Wastewater System Type: 25% redu	ction		Pump Required: Yes No May be required	
Septic Tank Size: 1000 gallons				
	Maximum Tren	ich Depth: 26	inches Soil Cover: 6 inches	
Trench Width: 36 inches	Distribution Me	ethod: 🔳 Serial	□ D-Box or Parallel □ Pressure Manifold □ Other: □	
Artificial Drainage Required: Yes	No 🔳 If yes, plea	ase specify detail	s:	
Management Entity Required: Yes	No Minimur	m O&M Require	ments:	
Permit conditions:				
The requirements of SEA NCAC CO.	stod by reference !-• .	ble normit and about	he met. Sustame shall be installed in accordance with the attack of the death of	
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: Mauthorized Agent's Signature:	rk Osborne RE	HS	Date: 10/03/25	
Authorized Agent's Signature:	John Ch	- REH	Expiration Date: 10/03/2030	
Owner/Legal Representative Signature	:		Date:	

*See attached site sketch

SITE SKETCH

9567-12-0083

Permit Number SFD2509-0062

Galt Land Development

Applicant's Name

Mark Osborne REHS

Authorized State Agent

Magnolia Hills 34

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.

