



**Harnett
COUNTY**
NORTH CAROLINA

Revised plan (House location)
SITD

HARNETT COUNTY ENVIRONMENTAL HEALTH

File/Permit #: SFD2510-0052

CDP #: _____

IMPROVEMENT PERMIT (IP)

New

Expansion

Repair

System Relocation

Change of Use

Owner: Becky Lee Blanchette

Applicant: Moss Home Builders

Property Location: 197 Horne Rd (SR 2039)

PIN/Lot Identifier: 0555-27-4682

Subdivision: _____

Lot #: _____ Block: _____ Section: _____

Facility Type: 74'x60' SFD

Number of bedrooms: 3

Number of Occupants: 6

Other: _____

Design Daily Flow: 360 GPD

LTAR (Initial): .5

gpd/ft² LTAR (Repair): .5 gpd/ft²

Wastewater System Type: 25% reduction

(Initial)

Pump Required: Yes No May be required

Usable Depth to Limiting Condition (Initial): 56

Wastewater System Type: 25% reduction

(Repair)

Pump Required: Yes No May be required

Usable Depth to Limiting Condition (Repair): 56

Effluent 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 REHS

Date: 11-21-25

Authorized Agent's Signature: Mark Osborne REHS

Expiration Date: 11-21-30

CONSTRUCTION AUTHORIZATION (CA)

New

Expansion

Repair

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Number of Occupants: 6

Other: _____

Design Daily Flow: 360 GPD

LTAR: .5 gpd/ft²

Effluent Standard: DSE HSE Other: _____

Type of Water Supply: Private well Municipal Supply Other: _____

Installation Requirements/Conditions

Wastewater System Type: 25% reduction

Pump Required: Yes No May be required

Septic Tank Size: 1000 gallons

Total Trench Length: 200 feet

Trench Spacing: 9 feet on center

Pump Tank Size: _____ gallons

Maximum Trench Depth: 30 inches

Soil Cover: 6 inches

Trench Width: 36 inches

Distribution 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 REHS

Date: 11-21-25

Authorized Agent's Signature: Mark Osborne REHS

Expiration Date: 11-21-30

Owner/Legal Representative Signature: _____

Date: _____

*See attached site sketch

Harnett County Environmental Health

SITE SKETCH

PIN 0555-27-4682

Permit Number SFD2510-0052

Moss Home Builders

Applicant's Name

Mark Osborne REHS

Authorized State Agent

Subdivision/Section/Lot Number

11-21-25

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

