

Harnett County Government Complex
307 W. Cornelius Harnett Boulevard
Lillington, NC 27546

ph: 910-893-7547
fax: 910-893-9371

August 24th, 2023

Har-Law Realty Corp
56 E Williams St
Angier, NC 27501

**RE: Failure to comply with Repair Completion at 151 Gregtown Lane, Angier NC
Final Notice**

To whom it may concern,

On, **May 30th, 2023 an Improvement Permit** was written so that repairs to your septic system could be made. It is your responsibility to see that all problems with the septic system are corrected. Until the system is repaired and an Operations Permit is issued, you continue to be in violation.

You are hereby notified that you are violating the Rules and Regulations adopted by the North Carolina Commission for Health Services in accordance with requirements of Article 11 Chapter 130A-335 (a) of General Statutes of North Carolina. Any person owning or controlling a residence, place of business, or place of public assembly containing water using fixtures connected to a water supply source shall discharge all wastewater directly to an approved wastewater system permitted for that specific use. A wastewater system may include components for collection, treatment and disposal of wastewater.

You are required to correct this problem within 30 days from the date on the Improvement Permit. It is requested that you contact the Health Department within 7 days in order to verify receipt of this letter. Be advised that if you do not comply within the allotted time frame legal action must be taken.

I can be contacted at 893-7547 Monday-Friday, from 8:00-9:00 a.m.

Sincerely,



Mark Osborne, R.E.H.S.
Environmental Health Specialist
Harnett County Department of Public Health

MO/kh

App# EH 2305-0019Repair

Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

ISSUED TO: Har-low Realty PROPERTY LOCATION: 151 Grogstown Ln
 SUBDIVISION: Brentwood II MHP LOT # _____
 NEW ☐ REPAIR ☒ EXPANSION ☐ Site Improvements required prior to Construction Authorization Issuance: _____
 Type of Structure: Existing SWMH
 Proposed Wastewater System Type: 25% reduction
 Projected Daily Flow: 600 GPD
 Number of bedrooms: 5 Number of Occupants: 10 max
 Basement ☐ Yes ☒ No
 Pump Required: ☐ Yes ☒ No ☐ May be required based on final location and elevations of facilities
 Type of Water Supply: ☐ Community ☒ Public ☐ Well Distance from well _____ feet Permit valid for: ☐ Five years
 Permit conditions: _____ ☐ No expiration

Authorized State Agent: Moh A. REH Date: 5-30-23 SEE ATTACHED SITE SKETCH
 The issuance of this permit by the Health Department 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 site 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 the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.

Construction Authorization

(Required for Building Permit)

The construction and installation requirements of Rules 1950, 1952, 1954, 1955, 1956, 1957, 1958 and 1959 are incorporated by references into this permit and shall be met. Systems shall be installed in accordance with the attached system layout.

ISSUED TO: Har-low Realty PROPERTY LOCATION: 151 Grogstown Ln
 SUBDIVISION: Brentwood II MHP LOT # _____
 Facility Type: Existing SWMH ☐ New ☐ Expansion ☒ Repair
 Basement? ☐ Yes ☒ No Basement Fixtures? ☐ Yes ☒ No
 Type of Wastewater System** _____ (Initial) Wastewater Flow: 600 GPD
 (See note below, if applicable ☐ 25% reduction (Repair))

Installation Requirements/Conditions

Septic Tank Size Existing gallons
 Pump Tank Size _____ gallons

Number of trenches 1
 Exact length of each trench 375 feet
 Trenches shall be installed on contour at a
 Maximum Trench Depth of: 12 inches
 (Trench bottoms shall be level to $\pm 1/4"$
 in all directions)

Trench Spacing: 9 Feet on Center
 Soil Cover: 6 inches
 (Maximum soil cover shall not exceed
 36" above the trench bottom)

Pump Requirements: _____ ft. TDH vs. _____ GPM

Aggregate Depth: _____ inches below pipe
 _____ inches above pipe
 _____ inches total

Conditions: Will need 6" of Group II or Group III Soil for
Cover over entire Drain Field area

WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM ANY PART OF SEPTIC SYSTEM OR REPAIR AREA.
 NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD AREA.

**If applicable: I understand the system type specified is different from the type specified on the application. I accept the specifications of this permit.

Owner/Legal Representative Signature: _____ Date: _____

This Construction Authorization is subject to revocation if the site plan, plat, or the intended use changes. The Construction Authorization shall not be transferred when there is a change in ownership of the site. This Construction Authorization is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit. SEE ATTACHED SITE SKETCH

Authorized State Agent: Moh A. REH Date: 5-30-23
 Construction Authorization Expiration Date: 5-30-28

Application # EH2305-0019

Harnett County Department of Public Health
Site Sketch

Property Location: 181 Grogdon Ln

Issued To: Har-low realty

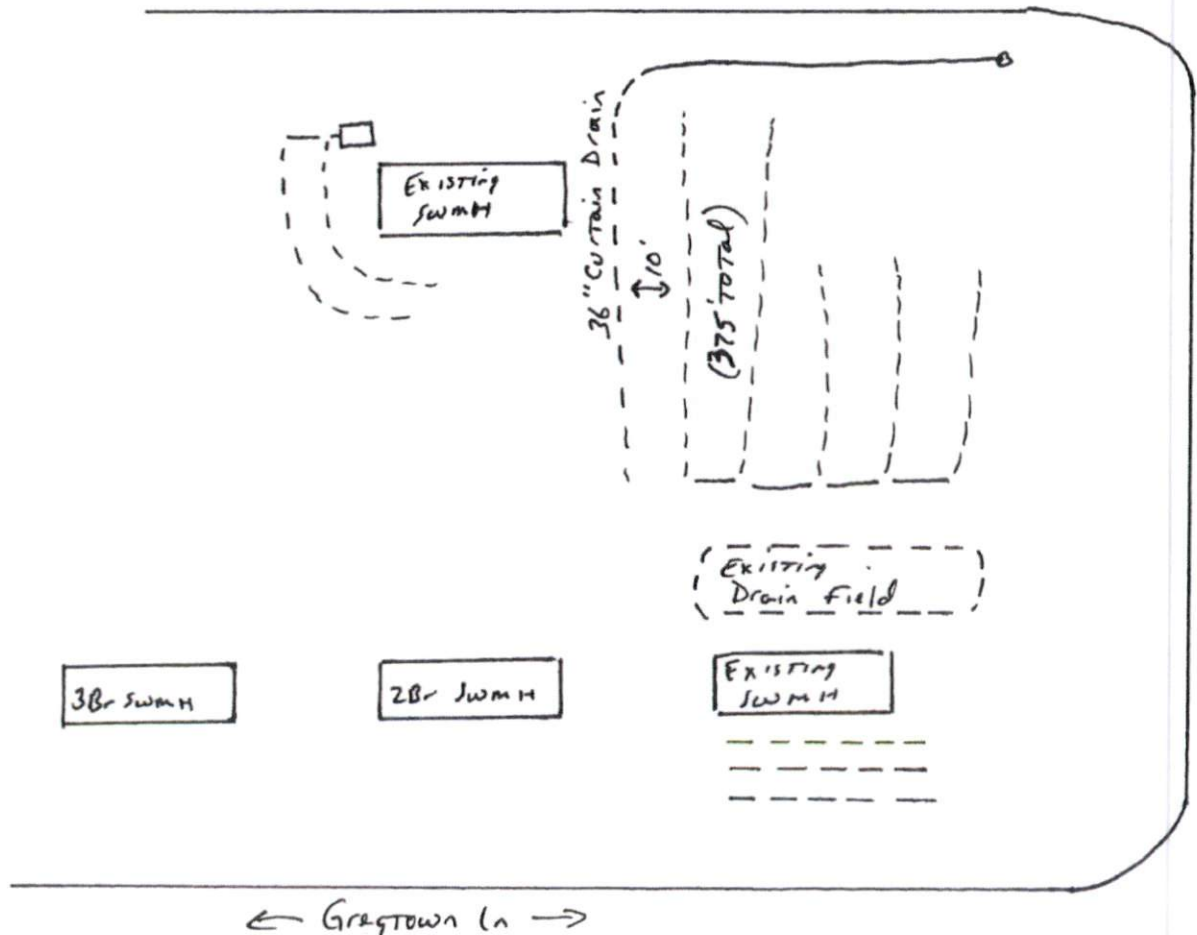
Subdivision Brentwood II MHP

Lot #

Authorized State Agent: Mah [Signature] REHS

Date: 5-30-23

* Must bring in 6"
of Group II or Group III
soil for cover over
entire Drain Field Area



This drawing is for illustrative purposes only. System installation must meet all pertinent laws, rules, and regulations.