

November 14th, 2025

Kenny Machado & Maria Santiago
75 Holly Oak Circle
Bunnlevel, NC 28323

**RE: Failure to comply with Repair Completion at 75 Holly Oak Circle, Bunnlevel NC
Final Notice**

To whom it may concern,

On, **September 29th, 2025 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



HARNETT COUNTY ENVIROMENTAL HEALTH

File/Permit #: EH2505-0010

CDP #: _____

IMPROVEMENT PERMIT (IP)

- Permit type checkboxes: New, Expansion, Repair, System Relocation, Change of Use

Owner, Applicant, Property Location, PIN/Lot Identifier, Subdivision, Lot #, Block, Section, Facility Type, Number of bedrooms, Number of Occupants, Other, Design Daily Flow, LTAR, Wastewater System Type, Pump Required, Usable Depth to Limiting Condition, Effluent Standard, Type of Water Supply

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: 09/29/2025
Authorized Agent's Signature: _____ Expiration Date: _____

CONSTRUCTION AUTHORIZATION (CA)

- Permit type checkboxes: New, Expansion, Repair, System Relocation, Change of Use

Owner: Kenny Gomez, Applicant: Kenny Gomez, Property Location: 75 Holly Oak Cir (SR 2545), PIN/Lot Identifier: 0506-94-9098, Subdivision: Forest Oaks, Lot #: 68, Block: _____, Section: _____, Facility Type: SFD, Number of bedrooms: 3, Number of Occupants: 6, Other: _____, Design Daily Flow: 360 GPD, LTAR: .6 gpd/ft^2, Effluent Standard: DSE, Type of Water Supply: Municipal Supply

Installation Requirements/Conditions

Wastewater System Type: 25% reduction, Pump Required: Yes, Septic Tank Size: existing gallons, Total Trench Length: 150 feet, Trench Spacing: 9 feet on center, Pump Tank Size: existing gallons, Maximum Trench Depth: 30 inches, Soil Cover: 6 inches, Trench Width: 36 inches, Distribution Method: D-Box or Parallel, Artificial Drainage Required: No, Management Entity Required: 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: 09/29/25
Authorized Agent's Signature: _____ Expiration Date: 09/29/2030
Owner/Legal Representative Signature: _____ Date: _____

*See attached site sketch

Harnett County Environmental Health

SITE SKETCH

PIN 0506-94-9098

Permit Number EH2505-0010

Kenny Gomez

Forest Oaks 68

Applicant's Name
Mark Osborne REHS

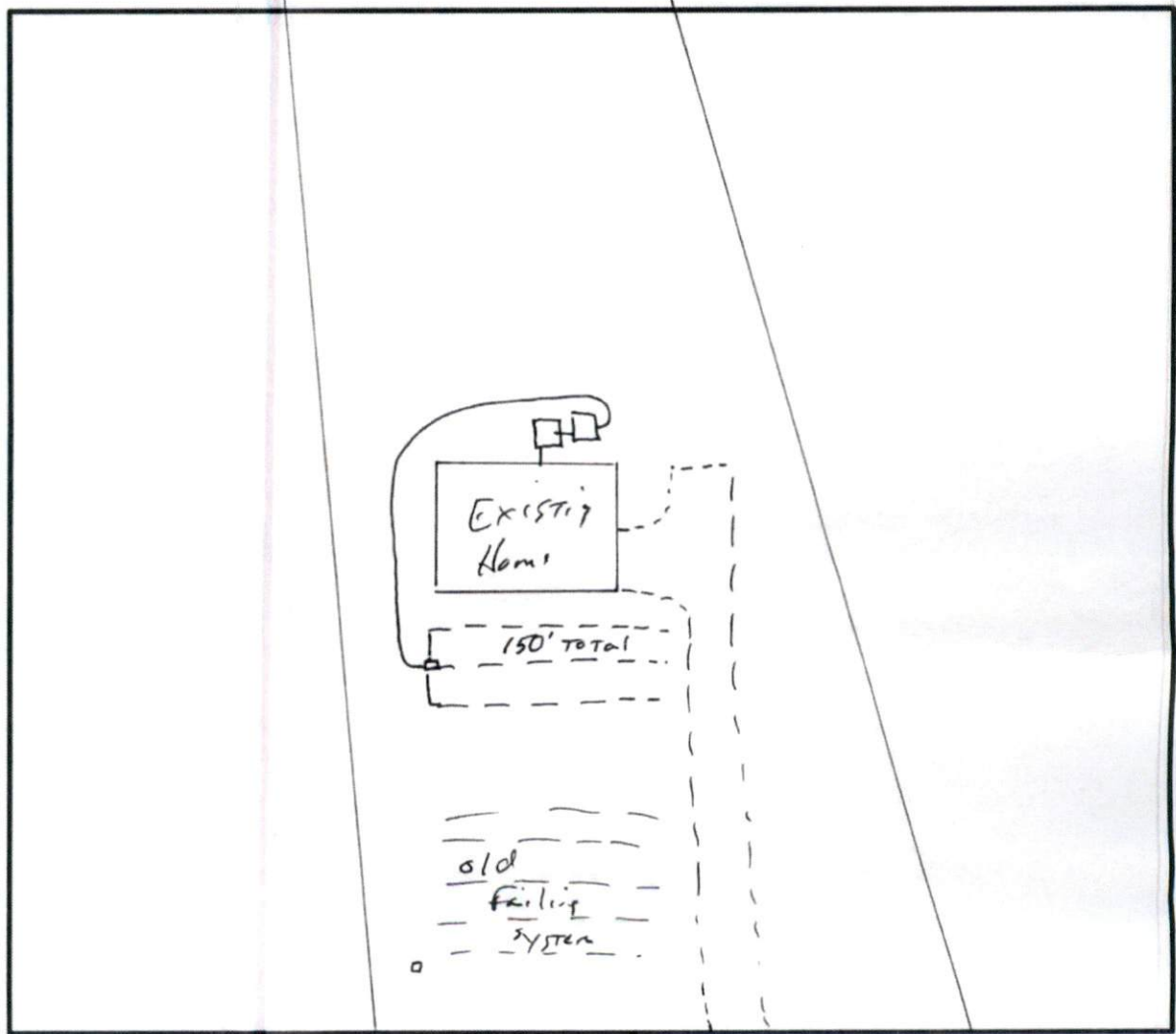
Subdivision/Section/Lot Number
09/29/2025

Authorized State Agent

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



← Holly Oaks →