



County of Wayne
Environmental Health
Department
 134 North John Street
 Goldsboro, NC 27530

Permit NO.: EH-IMPROV-2412-01022
 Permit Type: EH - Septic Improvement
 Work Classification: EH - New Septic System
 Permit Status: Issued

Township: **10** State Road: **1535 /47**

Location Address: **413 CREEKS EDGE DR (Creeks Edge - Lot 47), PIKEVILLE, NC 27863**
 Parcel Number: **3633565355**

Contacts

WOODCOX DEVELOPMENTS LLC 104 TWIN OAKS PL, Goldsboro, NC 27530	Owner	HMT Construction, LLC (G: 12/31/2025) 228 George Wilton Dr, Clayton, NC 27520 (919)754-7378	Applicant	hmtconstructionllc@gmail.com
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Description: Creeks Edge - Lot 47

Inspection Requests:
 Inspections: 919-731-1169 / Planning: 919-731-1650 /
 Environmental Health: 919-731-1174

Fees	Amount
EH - SEPTIC - Improvements New	\$350.00
Total:	\$350.00

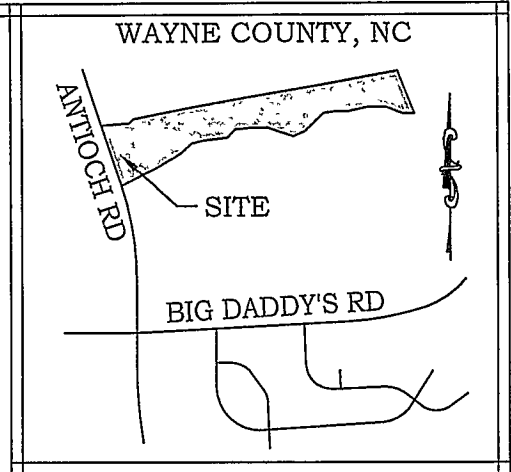
Payments	Amt Paid
Total Fees	\$350.00
Check # 01576	\$350.00
Amount Due:	\$0.00

Inspection Type	Environmental Health Specialist	Date Issued	Exp Date	Status
EH - IP (Improvements Permit)	<i>L. Movie</i>	01-28-26	01-28-31	OK
EH - CA (Construction Authorization)	<i>L. Movie</i>	01-28-26	01-28-31	OK
EH - OP (Operation Permit)				

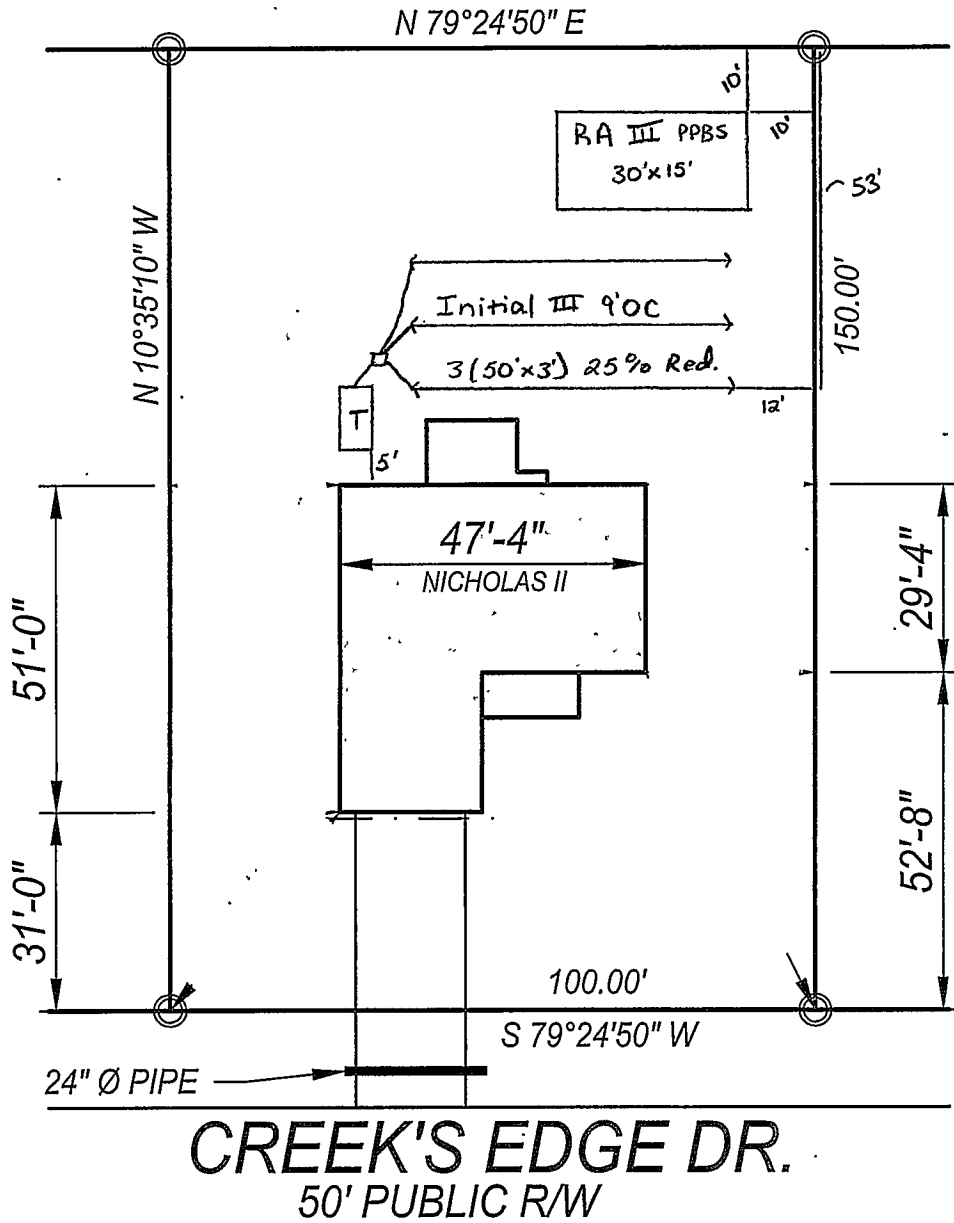
Additional Information

Water Source: Public
 Type of Establishment: Residential Dwelling Units
 Multiple Dwelling Units: No
 Unit Type: Bedrooms
 Unit_Count: 3
 Property Notes: Max number of occupants 6.
 Septic GPD: 360
 System Classification: Type III - Other Non-Conventional Trench System
 Other: 25% Reduction
 Line Length: 3(50x3)
 Line Depth: 18
 Nitrification Square Feet: 450
 Tank #1: Septic Tank
 Tank #1 Size: 1000
 Pump Required?: No
 System Notes: Max trench depth is 22".

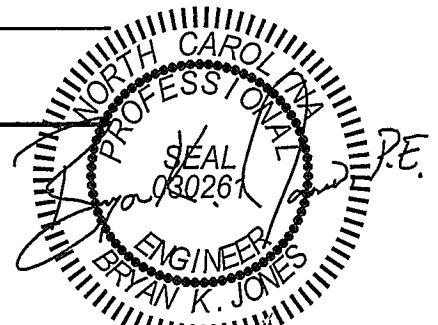
CREEK'S EDGE SUBDIVISION
 PLAT CABINET Q, SLIDE 17-1
 LOT NUMBER 47
 PIKEVILLE TOWNSHIP
 WAYNE COUNTY, NC
 LOT AREA = 15,000 SF



VICINITY MAP
 N.T.S.



* Max trench depth 22"
 * Use cheese cloth

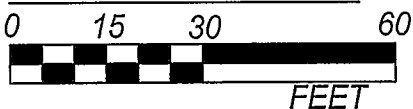


Digitally signed by:
 Bryan K. Jones, PE

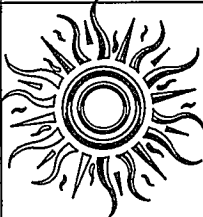
MIN. BUILDING SETBACKS

- FRONT = 30 FT
- SIDE = 10 FT
- REAR = 25 FT
- CORNER SIDE = 25 FT
- NCSR = 60 FT

GRAPHIC SCALE: 1"=30'



THIS PRE-CONSTRUCTION PLAN IS DEVELOPED TO DISPLAY THE LAYOUT OF BUILDINGS, DRIVEWAYS, UTILITIES, ETC. FROM A PREVIOUSLY APPROVED AND RECORDED SUBDIVISION PLAT. REFER TO RECORDED DOCUMENT FOR ADDITIONAL INFORMATION NOT SHOWN ON THIS PLAN.

	BRYAN K. JONES CONSULTING ENGINEERS, P.A. Post Office Box 10882 Goldsboro, North Carolina 27532 LIC#:C-3065 919-221-5222	Project Name: CREEK'S EDGE	
	Drawn By: BKJ	Project Number: 26007	Scale: 1" = 30'
		Title: PRECONSTRUCTION PLAN: LOT 47 <small>PRELIMINARY PLAT - NOT FOR RECORDATION, CONVEYANCES, OR SALE</small>	
		Client: HMT CONSTRUCTION	
		Date: 1/20/2026	Sheet: 1 of 1

Wayne County Health Department
Application Addendum

- Survey plat to scale* submitted
- Scaled* site plan submitted
- Unscaled site plan submitted
- *scale of 1" = no more than 60'

Improvement Permit Authorization to Construct

IF THE INFORMATION IN THE APPLICATION FOR AN IMPROVEMENTS PERMIT IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENTS PERMIT AND AUTHORIZATION TO CONSTRUCT SHALL BECOME INVALID. THE PERMIT IS VALID FOR EITHER 60 MONTHS OR WITHOUT EXPIRATION DEPENDING UPON DOCUMENTATION SUBMITTED. (COMPLETE SITE PLAN = 60 MONTHS; COMPLETE PLAT = WITHOUT EXPIRATION)

Site plan or Plat must show:

- Property Lines with Dimensions
- Driveway
- Proposed well or water line location
- Location of all proposed structures including garage or pool
- Where you want your septic system
- Streams or other Surface waters

HMT 228 George W. H. Dr 919-7547378
 Current Property Owner Address Phone #
413 Creeksedge Dr Creeksedge Lot 47
 Site Address Subdivision Name Section/Phase/Lot#

DEVELOPMENT INFORMATION:

- New Single Family Residence
- Expansion of Existing System
- Repair to Existing Subsurface Sewage Disposal System
- Non-Residential Type of Structure

Residential Specifications:

Maximum # of bedrooms: 3
 Maximum # of occupants: _____
 If expansion: Current # of bedrooms: _____
 Proposed expansion _____
 Public or Private Water
 Source Public

Non-Residential Specifications:

Type of Business: _____ Total Square Footage of Building: _____
 Maximum # of Employees: _____ Maximum # of Seats: _____
 Date Property with current boundaries was originally deeded & recorded: _____

If applying for Authorization to Construct, please indicate desired system types:

(Systems can be ranked in order of your preference)

- Conventional (gravel)
- Innovative (chamber, polystyrene, tire chips, multiple, peat, sand, filter, drip, etc.)
- Any
- Accepted (certain chamber or polystyrene)
- Other (specify) _____

The Applicant shall notify the local health department upon submittal of this application if any of the following apply to the property in question. If the answer to any question is "yes", applicant must attach supporting documentation.

- yes no Does the site contain any jurisdictional wetlands?
- yes no Is any wastewater going to be generated on the site other than domestic sewage?
- yes no Is the site subject to approval by any other public agency?
- yes no Does property have Easements or Right of ways across it?
- yes no Are there any existing wells, springs, or waterlines on this property?

I have read this application and certify that the information provided herein is true, complete and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible for the proper identification and labeling of all property lines and corners and making the site accessible so that a complete site evaluation can be performed.

[Signature] 1/21/26
 Property owner's or owner's legal representative** signature (required) Date
 **Must provide documentation to support claim as owner's legal representative

READ CAREFULLY AND SIGN BELOW

Our Environmental Health Specialists are anxious to assist you by evaluating your property. However, before we can evaluate your property we need your help. The following items are your responsibility:

- 1 For Improvement Permits without expiration: A RLS Plat; This is a property survey prepared by a Registered Land Surveyor, drawn to scale of one inch equals no more than 60 feet, that includes: Location of the proposed facility and appurtenances, site of proposed wastewater system, location of water supplies and surface waters, all irons must be in place.
- 2 Make the property accessible and visible, remove excessive vegetation and brush.
- 3 Identify all permanent property boundaries (corner and sidelines) with ribbons, stakes, flags, irons, etc.
- 4 Identify location of building site(s) and amenities (drives, swimming pools, other buildings) with ribbons stakes, flags, etc.
- 5 The issuance of the Improvements Permit in no way guarantees the issuance of other permits (e.g., building permits).
- 6 The Improvements Permit shall have no expiration date if the lot is officially surveyed and recorded, and is valid for 5 years if not. It is subject to revocation if the site plans or the intended use change. The authorization to construct shall be valid for 5 years from the date of the Improvements Permit.
- 7 An Operations Permit shall indicate the sewage system has been constructed to the standards set forth in the regulations, but shall in no way be taken as a guarantee that the system will function satisfactorily for any given period of time.

This permit is issued subject to compliance with subdivision and zoning regulations when applicable. To insure surface drainage, area in which nitrification field is installed must be landscaped properly with a "turtle-back" shaping of site and diversion of all surface runoff. Water from house gutters and downspouts must be diverted away from the septic tank system. Where artificial drainage has been installed to control the water table it must be maintained and downstream drainage outlets kept properly draining or malfunction of the septic tank will result. This permit does not constitute a warranty. This improvements permit does not negate or supercede any zoning restriction or restricted covenants in the chain of title. It is the responsibility of the permittee to determine whether or not such restrictions apply. Use of water-saving fixtures and plumbing is highly recommended. Wells should be located 100 ft. preferable from such sources of contamination such as building foundations chemically treated for pests, fuel tanks, animal pens, etc. This permit in no way guarantees the sewage disposal system or the functioning of the sewage disposal system.

- 8 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.
- 9 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.

I understand this document is not an improvements permit or an authorization to construct a septic system. This document is only an application for an improvements permit. I have read this application and certify that the information provided herein is true, complete and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible for the proper identification and labeling of all property lines and corners and making the site accessible so that a complete site evaluation can be performed.

Signature: _____
(Owner/Applicant)

Date: 1/21/26

SOIL/SITE EVALUATION
 for ON-SITE WASTEWATER SYSTEM
 (Complete all fields in full)

OWNER: HMT Construction
 ADDRESS: 228 George Wilton Dr.
 PROPOSED FACILITY: 3 BR PROPOSED DESIGN FLOW (.0400): 360
 LOCATION OF SITE: Creeks Edge lot 47
 WATER SUPPLY: Public Single Family Well Shared Well Spring Other _____
 EVALUATION METHOD: Auger Boring Pit Cut

APPLICATION DATE: 01/21/26
 DATE EVALUATED: 01/22/26
 PROPERTY SIZE: _____
 PROPERTY RECORDED: _____
 WATER SUPPLY SETBACK: _____

TYPE OF WASTEWATER: Domestic High Strength IPWW

P R O F I L E #	.0502 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941)			OTHER PROFILE FACTORS				PROFILE CLASS & LTAR	.0502(d) SLOPE CORRECTION
			.0503 STRUCTURE/ TEXTURE	.0503 CONSISTENCE/ MINERALOGY		.0504 SOIL WETNESS/ COLOR	.0505 SOIL DEPTH	.0506 SAPRO CLASS	.0507 RESTR HORIZ		
1	S 1-2%	0-16	LS	GR	SEXP VFR NSNP	S	S	N/A	N/A	III 0.6	0
		16-36	SCL	SBK	SEXP FI SSSP						
2	S 1-2%	0-14	LS	GR	SEXP VFR NSNP	SWC @ 40" 2.5Y 6/1	S	N/A	N/A	III 0.6	0
		14-40	SCL	SBK	SEXP FI SSSP						
3	S 1-2%	0-18	LS	GR	SEXP VFR NSNP	SWC @ 34" 2.5Y 6/2	S	N/A	N/A	III 0.6	0
		18-34	SCL	SBK	SEXP FI SSSP						
4	S 1-2%	0-15	LS	GR	SEXP VFR NSNP	S	S	N/A	N/A	III 0.6	0
		15-36	SCL	SBK	SEXP FI SSSP						

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM	SITE CLASSIFICATION (.0509): <u>S</u> EVALUATED BY: <u>L. Morris-Chilton</u> OTHER(S) PRESENT: _____
Available Space (.0508)	S	S	
System Type(s)	III	PPBPS	
Site LTAR	0.6	0.6	
Maximum Trench Depth	22"	24"	

LEGEND

use the following standard abbreviations

LANDSCAPE POSITION	GROUP	SOIL TEXTURE	CONVENTIONAL LTP/LTAR*	LPP LTP/LTAR*	MINERALOGY/ CONSISTENCE	STRUCTURE
CC (Concave Slope)	I	S (Sand)	1.2 - 0.8	0.6 - 0.4	SEXP (Slightly Expansive) EXP (Expansive)	G (Single Grain)
CV (Convex Slope)		LS (Loamy Sand)				M (Massive)
D (Drainage Way)	II	SL (Sandy Loam)	0.8 - 0.6	0.4 - 0.3		CR (Crumb)
DS (Debris Slump)		L (Loam)				GR (Granular)
EP (Foot Plain)	III	Si (Silt)	0.6 - 0.3	0.3 - 0.15		SBK (Subangular Blocky)
FS (Foot Slope)		SiCL (Silty Clay Loam)				ABK (Angular Blocky)
H (Head Slope)	IV	CL (Clay Loam)	0.4 - 0.1	0.2 - 0.05	MOIST VFR (Very Friable) FR (Friable)	PL (Platy)
I (Linear Slope)		SCL (Sandy Clay Loam)				IR (Prismatic)
N (Nose Slope)		SL (Silt Loam)			WET NS (Non-sticky)	
R (Ridge)		SC (Sandy Clay)			FR (Friable)	SS (Slightly Sticky)
S (Shoulder Slope)		SiC (Silty Clay)			FI (Firm)	S (Sticky)
T (Terrace)		C (Clay)			VH (Very Firm v. Very Sticky)	VS (Very Sticky)
		O (Organic)	None	None	EF (Extremely Firm)	NP (Non-plastic)
						SP (Slightly Plastic)
						P (Plastic)
						VP (Very Plastic)

NOTES
 HORIZON DEPTH: In inches below natural soil surface
 DEPTH OF FILL: In inches from land surface
 RESTRICTIVE HORIZON: Thickness and depth from land surface
 SAPROLITE: S (suitable) or U (unsuitable)
 SOIL WETNESS: Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - record Munsell color chip designation
 CLASSIFICATION: S (Suitable), FS (Provisionally Suitable), or U (Unsuitable)
 Evaluation of saporlite shall be by plus.
 Long-term Acceptance Rate (LTAR): gal/day/ft²

Show profile locations and other site features (dimensions, reference or benchmark, and North).

