30300

HTE# BRESIEGS-COG3 Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only an Improvement Permit	
ISSUED TO: Michelle Smith PROPERTY LOCATION: 85 Gar Top Cir. (N	C 27 W.
SUBSTITUTE COME CENTER TO S. THE	LOT # 43
NEW REPAIR EXPANSION Site Improvements required prior to Construction Authoriza	ation Issuance:
Type of Structure: 482 DOMH 28' × 76'	
Proposed Wastewater System Type: Porp to 25% red	
Projected Daily Flow: 486 GPD	
Number of bedrooms: Number of Occupants: max	
Basement Yes 150	
Pump Required:	
Type of Water Supply: Community Public Well Distance from well feet Permit valid for:	Lifive years
Permit conditions:	☐ No expiration
411	
Authorized State Agents:	
Authorized State Agent:: 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 me	HED SITE SKETCH
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 con	eeting their requirements. This
the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.	inpliance with the provisions of
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 shawith the attached system layout.	all be installed in accordance
ISSUED TO: Michelle Smith PROPERTY LOCATION: 05 Cak Top Cir. (SUBDIVISION Long Leaf Acs. PH III	NC 27 W.
SUBDIVISION LONG Leaf Acs 841 TT	INT # 4.3
Facility Type: 4BN DWMH 28'X76' Wew Expansion Repair	
Basement? Yes No Basement Fixtures? Yes No	
	CDD
Type of Wastewater System** (See note below, if applicable (Initial) Wastewater Flow:	GPD
Punp to 35% red. 55 (Repair)	
Installation Requirements/Conditions Number of trenches	
Septic Tank Size 1000 gallons Exact length of each trench 90 feet Trench Spacing: 9 Fe	
Pump Tank Size 1000 gallons Trenches shall be installed on contour at a Soil Cover: 1406 incl	hes
Maximum Trench Depth of: 26 18 inches (Maximum soil cover shall not	exceed
(Trench bottoms shall be level to $\pm 1/4$ " 36" above the trench bottom	
in all directions)	')
Duma Descination (CTD)	inches helew nine
Aggregate Depth:	inches below pipe inches above pipe
Conditions: Deep (2670) to shallow (1870) install required w	
williams. seeplasso a surpost port of 1 ustail regulared wi	inches total
AUTED LIVE IN AUTE IN	
NATER 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.	
**H applicables I understand the system two applicables I I'M I I'M	
**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:	
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.	ACHED SITE SKETCH
Authorized State Agent: Date: 12/11/12018 Construction Authorization Expiration Date: 12/11/2023	
And a Construction Authorization Expiration Date: 12/11/2023	-

BE LOUTED -

MREA

Permit # 30 300

Harnett County Department of Public Health Site Sketch

	PROPERTY LOCATON: 85 Call Top Cir. (NC 27 W.)
ISSUED TO: Michelle Smith	SUBDIVISION LODG LEEF ACS. PHILLOT # 43
	10/11
Authorized State Agent:	12/11/2018
ANDORE	Em) (SIACIA)

* POWER & POATIER SHALL BE ROUTED AROUND SEPTIC AREA & INITIAL & REPAIR AREAS MAY BE SWITCHED *NO PROPOSESS DELKS/PURCHES [SFT SETBACK] * DEEP (26IN) -> SHALLOWS (18 IN) INSTALL REQUIRED

