30246

HTE# BRES 1811-8033

Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: NC2105 SUBDIVISION REPAIR Site Improvements required prior to Construction Authorization Issuance: Type of Structure: SFD (65 > 38) Proposed Wastewater System Type: Pume To 25% REDUCTION Projected Daily Flow: 360 GPD

Number of bedrooms: 3 Number of Occupants: 6 Basement Yes No Pump Required: Yes No May be required based on final location and elevations of facilities Permit valid for: Five years Permit conditions: Authorized State Agent:: 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 ISSUED TO: ANGUS STRICKLAND PROPERTY LOCATION: NC2105 SUBDIVISION LOT #

Facility Type: SFO (65 38)

New Expansion Repair

Basement? Yes No Basement Fixtures? Yes No

Type of Wastewater System** Pune 10 25 % Reduction System (Initial) Wastewater Flow: 360 GPD (See note below, if applicable Pune To 25%, RED SYS (Repair) Number of trenches _ 3 & & Installation Requirements/Conditions Exact length of each trench 100 150 feet Trench Spacing: 9 Feet on Center Septic Tank Size 1000 gallons Soil Cover: 6 Pump Tank Size 1000 gallons Trenches shall be installed on contour at a Maximum Trench Depth of: ____18 ____ inches (Maximum soil cover shall not exceed (Trench bottoms shall be level to +/-1/4" 36" above the trench bottom) in all directions) Pump Requirements: ______ft. TDH vs. _____ GPM __ inches below pipe Aggregate Depth: inches above pipe Conditions: 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: _ 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 SEE ATTACHED SITE SKETCH 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. Authorized State Agent: Construction Authorization Expiration Date:

Harnett County Department of Public Health Site Sketch

		PROPERTY LOCATON:	NCZIOS		
ISSUED TO: ANGUS	STEICKLAND	SUBDIVISION			LOT #
Authorized State Agent:	*	S (OLIVER TOLK	5000 Date:	2)5)79	
	NCZIO		LONG A		MUM SETBACK
	Ex7.		TANK SI TANKS DESIRE	MAY BE	MIWIMUM. LARGER INSTALLED IF
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	FENCE				
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Department of Environment, Health and Natural Resources Division of Environmental Health On-Site Wastewater Section

Sheet: Property ID: Lot #: File #: Code:

SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

Location Water Evalua		Applican l:□ Auge	Date Desi Prop Public 1	Evaluated: gn Flow (.1949): erty Recorded: ndividual	Property Siz Well Spring Cut Process Mixed	e:	er		
E Position		e Horizon Depth (In.)	SOIL MORPHOLOGY .1941		OTHER PROFILE FACTORS				
	Landscape Position/ Slope %		.1941 Structure/ Texture	.1941 Consistence Mineralogy	.1942 Soil Wetness/ Color	.1943 Soil Depth (IN.)	.1956 Sapro Class	.1944 Restr Horiz	Profile Class & LTAR
)		0-1)	6 5	NES NO IND					
		17-24	59x C	VEZ NO NOP	10/27/2022				VS
2		0-18	6 5	40 × 140					
		18:26	S8K C	FR S/SP	10127/2024"				15/PS · 3
3		0.54	C 2	VED NS/UP				-	
		2436	53× C	VERNS/UP FR S/SP	10x7/236				P5 .3
		- 15 St 17							
4		0-18	65	VFR NS/W					
				40 ss/sp					
-		30.	58x C	FOZ S/SP	10127/2041				P5.3
5				VET INS/AP					
					C323 @ 40				P5.3
G		0-50	G 5	405 2126 405 2126	055698,				P5.3
Descrip	tion	In	itial Re	nair System	Other Factors (1946):				

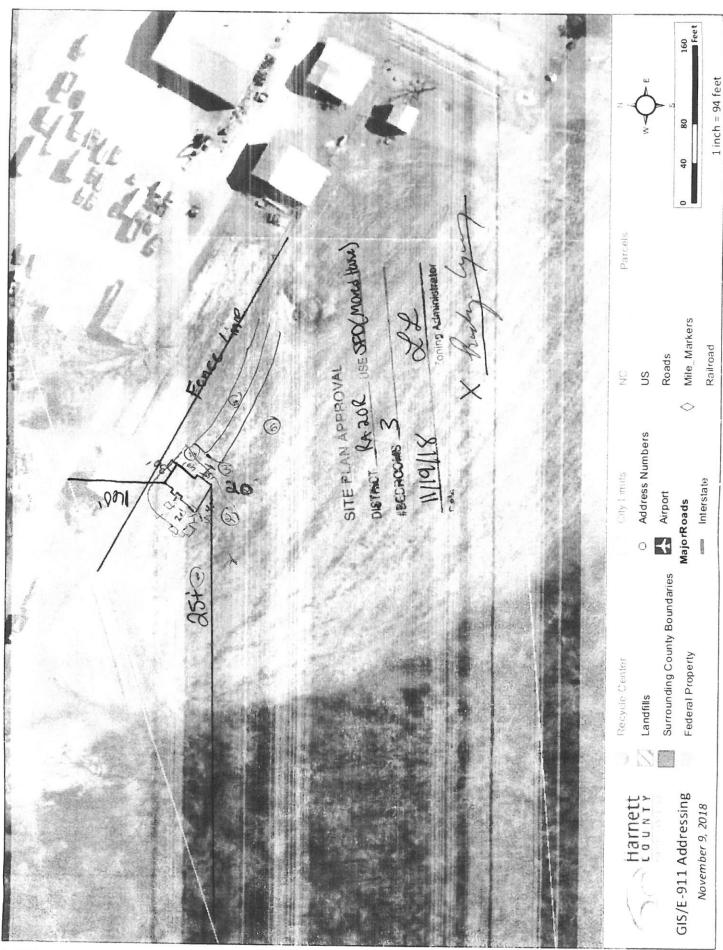
Description Initial Repair System Other Factors (.1946):
System System System Other Factors (.1946):
Site Classification (.1948):

Evaluated By:
Others Present:

Other Factors (.1946):
Site Classification (.1948):

Others Present:

3×100 2x150 PUMP DUE TO BASEMENT



NOT FOR LEGAL USE .

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