HTE# SAD1811-0004 Harnett County Department of Public Health BRES1904-0004 Improvement Permit

Improvement Permit

A	building permit cannot be issued with only an Improvement Permit	1420
ISSUED TO: Scothern Touch H	PROPERTY LOCATION: 1155 Call Grave Ch. Rd.	LOT # 2
NEW ☐ REPAIR ☐ EXPANSIO		
Type of Structure: 382 62 x501 5	The improvements required prior to construction nutriorization in	ssuance.
Proposed Wastewater System Type:		
Projected Daily Flow: 360 GPD	2: #\(\sqrt{1}\)	
Number of bedrooms: 3 Number of Occup	ants: G max	
Basement Yes Ao		
	red based on final location and elevations of facilities	
Type of Water Supply: Community Public	THE COLUMN TWO CASES OF THE COLUMN TO THE COLUMN TWO CASES OF THE COLUMN TWO C	Five years
Permit conditions:		No expiration
	04/12/20261	
Authorized State Agent::	Date: 01/03/2019 SEE ATTACHED S	SITE SKETCH
The issuance of this permit by the Health Department in no way guaran	tees the issuance of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting to	their requirements This
	hanges. The Improvement Permit shall not be affected by a change in ownership of the site. This permit is subject to compliance	
the Laws and Rules for Sewage Treatment and Disposal and to conditions		,
	Construction Authorization	
	(Required for Building Permit)	
The construction and installation requirements of Rules .1950, .1952, .19 with the attached system layout.	154, .1955, .1956, .1957, .1958. and .1959 are incorporated by references into this permit and shall be met. Systems shall be in	installed in accordance
ISSUED TO: Soutlern Tach.	HONCES PROPERTY LOCATION: 1155 CONK Grove Ch. a SUBDIVISION	A. (SC 1535
200 (-)	ZORDIAIZION	LOT #
acility Type: 381 62'x50' SITS		
	ures? 🗆 Yes 🔲 No	
Type of Wastewater System**	entional Gravel (Initial) Wastewater Flow: 36	GPD GPD
(See note below, if applicable □)		
PUMP to	Conventional (Repair)	
Installation Requirements/Conditions	Number of trenches 4	
Septic Tank Size \\OOO gallons	Exact length of each trench 90 feet Trench Spacing: 9 Feet o	on Contor
	, ,	2
Pump Tank Size gallons		(IMPORT)
	Maximum Trench Depth of: inches (Maximum soil cover shall not exce	ed .
	(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
		inches above pipe
Conditions: GIN Imported Soil	cover negured, At-Grade Sys. NA Shall be routed around Septicaza	inches total
Hay Poundertion drain	shall be routed around septicasea	
	E 10FT. FROM ANY PART OF SEPTIC SYSTEM OR REPAIR AREA.	
NO UTILITIES ALLOWED IN INITIAL OR REPAIR D		
	is different from the type specified on the application. I accept the specifications of this peri	mit.
Owner/Legal Representative Signature:	Date:	
	lat, or the intended use changes. The Construction Authorization shall not be transferred when there is a change in ownership o	of the cite. This
		ED SITE SKETCH
	2	7.7.2
Authorized State Agents	13 100 Nous Nove (12) 103/2010 NA	12/2019
Authorized State Agent: Date: Date: Date: Authorized State Agent: Date:		
	Construction Authorization Expiration Date: 100 12034 64	112024

Harnett County Department of Public Health Site Sketch

