Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only an Improvement Permit Hicks Road (Cool Springs Rd. - SR 1265) PROPERTY LOCATION: ISSUED TO: Clayton Homes of Sanford SUBDIVISION EXPANSION REPAIR Site Improvements required prior to Construction Authorization Issuance: Type of Structure: 3-bedroom 28'x56' DWMH Proposed Wastewater System Type: 25% Reduction System Projected Daily Flow: 360 Number of bedrooms: 3 Number of Occupants: 6 Basement Tes Pump Required: Yes X No May be required based on final location and elevations of facilities Type of Water Supply: Community NA Public Well Distance from well NA X Five years Permit valid for: Permit conditions: No expiration Authorized State Agent:: Date: OS 114 2019 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: Clayton Homes of Sanford PROPERTY LOCATION: Hicks Road (Cool Springs Rd. - SR 1265) SUBDIVISION Facility Type: 3-bedroom 28'x56' DWMH ☐ Expansion Repair Basement? TYes Basement Fixtures? Yes 25% Reduction System Type of Wastewater System** (Initial) Wastewater Flow: 360 (See note below, if applicable) 25% Reduction System Installation Requirements/Conditions Number of trenches 4 Septic Tank Size 1000 Exact length of each trench 75 Trench Spacing: 9 Feet on Center Pump Tank Size _____ gallons Trenches shall be installed on contour at a Soil Cover: 12 Maximum Trench Depth of: 24 _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. ____ inches below pipe Aggregate Depth: NA inches above pipe inches total 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 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: 05/14/2024

HTE#	BRES	1904	-000
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Permit # ____NA

Harnett County Department of Public Health Site Sketch

PROPERTY LOCATON: Hicks road (cos) Springs road

SUBDIVISION LOT #

Authorized State Agent: Correct Co