SFO	1908-0001	
App#_	t	

Harnett County Department of Public Health

BRE51908.0009

Improvement Permit

	PROPERTY LOCATION: 880 A	ollino Mill Rd. (SR1401)			
ISSUED TO: Eral Varinca	SUBDIVISION Frol Varia	SUBDIVISION Frol Varinca, Matthew Pance 101 # 2D			
NEW REPAIR EXPANSIO		equired prior to Construction Authorization Issuance:			
Type of Structure: G-Gedroom 140 x80	3' SFD				
Proposed Wastewater System Type: 25% Ned	resign sys. Illig				
Trojected barry from.	pants: 12 max				
Basement Tres No	Jains max				
	ired based on final location and elevations of facilities				
Type of Water Supply: Community Public		Permit valid for: Five years			
Permit conditions:		□ No expiration			
Authorized State Agent::	Date: 02/16	2015 SEE ATTACHED SITE SKETCH			
		ecking 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 own	ership of the site. This permit is subject to compliance with the provisions of			
the Laws and Rules for Sewage Treatment and Disposal and to condition	is of this permit.				
	Construction Authorization				
	(Required for Building Permit)				
	954, 1955, 1956, 1957, 1958, and 1959 are incorporated by references	into this permit and shall be met. Systems shall be installed in accordance			
with the attached system layout.					
ISSUED TO: Erol Varinca	PROPERTY LOCATION 880	rollins Mill Ad. (52 1401)			
	SURDIVISION Erol Ver	rinca, Matthew Prince 101 # 25			
Facility Type: 6-Bodroom 146'x80' s	New Expansion Repair	theat, and the second			
	tures? Yes No				
		(Initial) Wastewater Flow: 720 GPD			
(See note below, if applicable)	reduction system	(IIIItiai) Wastewater Flow OFD			
	Ty not 5 - (Bonnie)				
Installation Requirements/Conditions	Number of trenches 4 (Repair)				
Septic Tank Size 1500 gallons		Trench Spacing: 9 Feet on Center			
	Exact length of each trench	, , ,			
Pump Tank Sizegallons		Soil Cover:inches			
	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)			
D	in all directions)	~A			
Pump Requirements:ft. TDH vs	GPM	inches below pipe			
		Aggregate Depth: inches above pipe			
Conditions:		Ainches total			
WATER LINES (INCLUDING IRRIGATION) MILES	T TOUT FROM ANY PART OF FEMALE CYCTEN OR I	OFFILID ADEA			
	E 10FT. FROM ANY PART OF SEPTIC SYSTEM OR F	(EPAIK AKEA.			
NO UTILITIES ALLOWED IN INITIAL OR REPAIR D	RAIN 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:		Date:			
	olat, or the intended use changes. The Construction Authorization shall not b				
onstruction Authorization is subject to compliance with the provisions of	the Laws and Rules for Sewage Treatment and Disposal and to the condition	ons of this permit. SEE ATTACHED SITE SKETCH			
Authorized State Agent:	Date:	(ATOCO 16/2019 09/13/2019			
Carpa =	Sonstruction Authorization Expiration D	NO CALORILLAMIN OGISTALA			

5=01908-0001 HTE# Bres1908-0009 CSYS. RELOCATION

Permit # _____NA

Harnett County Department of Public Health Site Sketch

	_	PROPERTY LOCATON:	880 Nollins N	Mill Rd. (SM 1401)	
ISSUED TO: _	TErol Varinca	SUBDIVISION	Erol Varince/1	Mattlew Prince-LOT # 2	0.5
Authorized Sta		,		09/13/2019	
Authorized Sta	ate Agent: State of the state o	FENCED AREA OT PROPOSED POOL SPRED LOSTALL LOSTALL	EUS Date:	09/13/2019 A TO: DUKE DOWN	
	THIS DRAWING 3	w			
*	ILLUSTRATIVE PUR	ouse only A			
	Sts. INSTALL MUST	MEET ALL Y			
	PERTINENT LAW	DS, WLES			
	AND REGULA	710125			
	701/100		1 31 1401		