SF	01908-000	,
App#		ť

BRE51908-0009

Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued wit	
ISSUED TO: Eral Varinea SUBDIVISION	Erol Varinca, Matthew Prince 101 # 2D
NEW REPAIR EXPANSION	Site Improvements required prior to Construction Authorization Issuance:
Type of Structure: G-Bedroom 140 X80' SFD	site improvements required prior to construction nationization issuance.
Proposed Wastewater System Type: 25% reduction \$5. TILG	
Projected Daily Flow: 720 GPD	
Number of bedrooms: 6 Number of Occupants: 12 max	
Basement Yes ANO	
Pump Required: Yes No May be required based on final location and eleva	ations of facilities
Type of Water Supply: Community Public Well Distance from well	
Permit conditions:	□ No expiration
- Allendary	
Authorized State Agent:: Date:	SEE ATTACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guarantees the issuance of other permits. The permit	
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.	
C	.1 - 2 - 2
Construction Au	thorization
(Required for Buildi	ing Permit)
The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .1957, .1958, and .1959 ar	e incorporated by references into this permit and shall be met. Systems shall be installed in accordance
with the attached system layout.	
RECIED TO. F.C. \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	LOCATION: 880 1-11:05 M.1) 11 (52 1401)
ISSUED TO: Erol Varinca PROPERTY	LOCATION: 880 rollins Mill Nd. (SN 1401) ON Erol Varinca, Matters Prince LOT # 25
SUBDIVISION TO THE SUBDIVISION OF THE SUBDIVISION O	in erol varinca, material mine with as
· · · <u> </u>	ion Repair
Basement? Yes No Basement Fixtures? Yes No	700
Type of Wastewater System** 25% reduction system	(Initial) Wastewater Flow: 720 GPD
(See note below, if applicable)	
Pump to 25% red. 5ys. Installation Requirements/Conditions Number of trenches 4	_(Repair)
Installation Requirements/Conditions Number of trenches 4	
Septic Tank Size 1500 gallons Exact length of each trench	150 feet Trench Spacing: Feet on Center
Pump Tank Sizegallons Trenches shall be installed on co	, ,
Maximum Trench Depth of:	
(Trench bottoms shall be level to	SCHOOL STATE OF THE STATE OF TH
N. CONTROL CONTROL OF THE CONTROL OF	30 above the trench bottom)
in all directions)	inches below pipe
Pump Requirements:ft. TDH vsGPM	
	Aggregate Depth: inches above pipe
Conditions:	inches total
WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM ANY PART OF S	EPTIC 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	ed on the application. I accept the specifications of this permit.
Owner/Legal Representative Signature:	Date:
This Construction Authorization is subject to revocation if the site plan, plat, or the intended use changes. The Construction	tion 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	d Disposal and to the conditions of this permit. SEE ATTACHED SITE SKETCH
Authorized State Agent:	Date: 08/16/2019
Andrew Correspondent Author	
COMPOSITURION AUTHOR	reaction Expiration vate

HTE# ________HTE# ________

Permit # ₩A

Harnett County Department of Public Health Site Sketch

