## Harnett County Department of Public Health Improvement Permit A building permit cannot be issued with only an Improvement Permit

PROPERTY LOCATION	N: 3857 US 401 N
ISSUED TO: Margie Michain SUBDIVISION	Latoja McClain 101# Al
	ite Improvements required prior to Construction Authorization Issuance:
Type of Structure: 3-Bedroom 58 x 28 1000	
Proposed Wastewater System Type: 25%- Nedoction 30-	
Projected Daily Flow: GPD	
Number of bedrooms: Number of Occupants: max	
Basement (Yes No	
Pump Required: Yes No May be required based on final location and elevation	
Type of Water Supply: Community Public Well Distance from well	
Permit conditions:	No expiration
119	
Authorized State Agent:: O Carallet Date:	02/21/2020 SEE ATTACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guarantees the issuance of other permits. The permit hold site is subject to revocation if the site plan, plat, or the intended use changes. The Improvement Permit shall not be affect the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.	der is responsible for checking with appropriate governing bodies in meeting their requirements. This
Construction Author	orization
(Required for Building	
The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .1957, .1958, and .1959 are including with the attached system layout.	
ISSUED TO: Margre McClain PROPERTY LO SUBDIVISION.	A second
Facility Type: 3-Bedsen 18 x 20 unl New Expansion Basement? Yes No Basement Fixtures? Yes No	
Type of Wastewater System** _ 25% Reduction 3751	(Initial) Wastewater Flow: 360 GPD
(See note below, if applicable ) 50% NEDWATER HORIZON REGION STSTEM (R	rect lepair)
Installation Requirements/Conditions Number of trenches 4	
Septic Tank Size 1600 gallons Exact length of each trench 6	feet Trench Spacing: Feet on Center
Pump Tank Sizegallons	. 0
Maximum Trench Depth of:	2007-00-00-00-00-00-00-00-00-00-00-00-00-
(Trench bottoms shall be level to +	
in all directions)	200 above the trench bottom
Pump Requirements:ft. TDH vsGPM	A 9A inches below nine
rump requirementsit. 1011 vsoffi	Aggregate Depth: NA inches below pipe inches above pipe
Conditions: Gravity to 0-Box Equal Distribute	Aggregate Depth: NA inches above pipe
conditions. Gravity 10 0-62 Equal with the	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: 1 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:
This Construction Authorization is subject to revocation if the site plan, plat, or the intended use changes. The Construction	
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.  SEE ATTACHED SITE SKETCH	
Authorized State Agent: Date: 02/21/2020	
Authorized State Agent:	

## Harnett County Department of Public Health Site Sketch

Property Location: 3855 US 401 N Latoja McClain Lot # AI Issued To: Marge McClain Subdivision\_ Test Date: 02/21/2020 Authorized State Agent: \_

