Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only an Improvement Permit
PROPERTY LOCATION Old US421

		PROPERTY LUCATION: OR OUT		
ISSUED TO: Daniel Cortes		SUBDIVISION Peach Farm E	states	LOT # 39
	XPANSION	Site Improveme	ents required prior to Construction A	uthorization Issuance:
Type of Structure: DWMH				
Proposed Wastewater System Type: 25% Reduc	tion System	_		
Projected Daily Flow: 360 GPD				
the state of the s	of Occupants: 6	max		
Basement Yes No				
Pump Required: Yes 🗵 No 🔲 May	be required based on final	location and elevations of facilities	2	
Type of Water Supply:	ublic Well Dist	ance from well fe	eet Permit valid for	_ ′
Permit conditions:				■ No expiration
	1			
Authorized State Agent::	CHDs.	Date: 9/9/20		ATTACHED SITE SKETCH
The issuance of this permit by the Health Department in no waste is subject to revocation if the site plan, plat, or the intenthe Laws and Rules for Sewage Treatment and Disposal and to	ded use changes. The Improveme			
	Const	ruction Authorizatio	n	
	Mark Mark	equired for Building Permit)	*	
The construction and installation requirements of Rules .1950,	CONTROL DESCRIPTION OF PROPERTY AND ADDRESS OF THE PARTY		elerences into this permit and shall be met. Sy	estems shall be installed in accordance
with the attached system layout.		į		
ISSUED TO: Daniel Cortes		PROPERTY LOCATION: O	ld US421	
		SUBDIVISION Peach Fai	rm Estates	LOT # 39
Facility Type: DWMH	✓ New	☐ Expansion ☐ R	Repair	
	ent Fixtures? Yes	□No		
	ction System		(Initial) Wastewater Fl	OW: 360 GPD
(See note below, if applicable)			(IIIIIai) Wastewater III	OW OI D
	6 Reduction System	(D i.)		
		(Repair)		
Installation Requirements/Conditions		iches 1		Marion was Marion
Septic Tank Size 1000 gallons		A STATE OF THE STA	feet Trench Spacing: 9	
Pump Tank Sizegallons		be installed on contour at a	Soil Cover: 6	inches
	Maximum Trend	th Depth of: 18 in	nches (Maximum soil cover sh	nall not exceed
	(Trench bottom	s shall be level to +/-1/4"	36" above the trench	bottom)
	in all directions	.)		
Pump Requirements:ft. TDH vs.		,		inches below pipe
				inches above pipe
Conditions:				inches total
conditions.				menes total
WATER LINES (INCLUDING IRRIGATION) A	AUST BE 10FT, FROM A	ANY PART OF SEPTIC SYSTEM	A OR REPAIR AREA.	
NO UTILITIES ALLOWED IN INITIAL OR REI	PAIR DRAIN FIELD AR	EA.		
**If Fill I washed the water to a		4	Control of the Control	14:
**If applicable: 1 understand the system type s	recilied is dillerent from	the type specified on the appli	ication. I accept the specifications	of this permit.
Owner/Legal Representative Signature:			Date:	
This Construction Authorization is subject to revocation if the si				
Construction Authorization is subject to compliance with the pa	visions of the Laws and Rules fo	r Sewage Treatment and Disposal and to th	e conditions of this permit.	SEE ATTACHED SITE SKETCH
Authorized State Agent:	MITTED I	pehs 1	Date: 9/9/20	
Authorized State Agent.	1	struction Authorization Expiration		
	CONS	THE PROPERTY AND INDICATED A STREET	1100 17416 313123	

Harnett County Department of Public Health Site Sketch

Property Location: Old US421	(85 Bent Tree)		
Issued To: Daniel Cortes	The state of the s	Subdivision Peach Farm Estates	Lot # 39
Authorized State Agent:		XXX (OLIVER TOLKSDORD)	_ Date: 91920
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		Yong S	
			- 1
		, REPAIR	23
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		81	
		BENT TREE CT	

This drawing is for illustrative purposes only. System installation must meet all pertinent laws, rules, and regulations.