Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: 857 DIXON 2010 (SZ1559) MICHAND MOGNEY ISSUED TO: SUBDIVISION 10T # REPAIR EXPANSION Site Improvements required prior to Construction Authorization Issuance: NEW X 3-650700M 58'X 28' DWMH Type of Structure: __ Proposed Wastewater System Type: 25% 12000000 55 Projected Daily Flow: 360 GPD Number of bedrooms: Number of Occupants: Basement Yes 1 No May be required based on final location and elevations of facilities Pump Required: Yes Type of Water Supply: Community Public Well Distance from well 504 feet Permit valid for: Eive years No expiration Permit conditions: Authorized State Agent:: 08/13/2021 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 with the attached system layout. PROPERTY LOCATION: 857 DIXON ROAD (521559) ISSUED TO: NICHARD MOODES SUBDIVISION Facility Type: 3-By 5-8'x 28' DWMH New Expansion Basement Fixtures? Yes Basement? Yes No (Initial) Wastewater Flow: 360 Type of Wastewater System** 25% ASONTION STREM (See note below, if applicable) 25% LEWORDN S.S. Installation Requirements/Conditions Number of trenches Trench Spacing: Septic Tank Size ______ gallons Feet on Center Soil Cover: inches Pump Tank Size _____gallons Trenches shall be installed on contour at a Maximum Trench Depth of: 22 (Maximum soil cover shall not exceed inches (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: inches above pipe inches total Conditions: CANITY TO D-BOX EQUAL DISTUBUTION 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 SEE ATTACHED SITE SKETCH 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. Date: 08/13/2021 Authorized State Agent: ANDREW CURSIP

Harnett County Department of Public Health Site Sketch

Property Location: 857 DIXON NOAD (SA 1559)	
Issued To: NICHARD MOONEL Subdivision	Lot #
Authorized State Agent:	Date: 08/13/2021
AHONEN CONIN	
* GRAVITY TO D-BOX ELEVAL DISTRIBUTED	
* INSTALL NO HIGH UPHILL AS CONTOUR ALLOWS	
* SOFT EXT WELL SETBACK	
184'	
	Ex
	SHE
25% REDUCTIONS	
NEODEL NEODEL	
ANZA ANZA	, / /
	, /
COCO STATE	, /
	_ / /
7th	7 /
D	/ /
20 30r DJ	/235'
44,	,/
58'	~ /
90,51	M EXT
/ E	VELL
This drawing is for illustrative purposes only. System installation must meet all pertinent	laws, rules, and regulations.

71X00 2000 (52 1559)