Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: 209 TEWELL LN - (FESTUS 10. SUISCO) ISSUED TO: CULT-WELL DURINT TEE TOP EXPANSION REPAIR Site Improvements required prior to Construction Authorization Issuance: Type of Structure: 3-BEDZON SWAH Proposed Wastewater System Type: 2572 Nasouction STS -Projected Daily Flow: 366 GPD Number of bedrooms: __ 3 Number of Occupants: _ S ____ max Basement Yes No May be required based on final location and elevations of facilities Pump Required: Yes No Type of Water Supply: Community Public Well Distance from well NA feet Permit valid for: Five years No expiration Permit conditions: 08/63/2621 Cland all Date: 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. ISSUED TO: CURA-WELL BUMT PROPERTY LOCATION: 209 JEWELL US. (FESTUS READ) TEE TOP SUBDIVISION New Facility Type: 3-BL SWMH Repair Expansion Basement Fixtures? Yes Basement? Yes No 25% NEOSCHION STETEN (Initial) Wastewater Flow: 360 GPD Type of Wastewater System** (See note below, if applicable) At-GALDE 25% NEDXTION (Repair) Installation Requirements/Conditions Number of trenches 3 Septic Tank Size 1000 gallons Exact length of each trench __ Pump Tank Size _____gallons Trenches shall be installed on contour at a Soil Cover: Maximum Trench Depth of: 18 (Maximum soil cover shall not exceed (Trench bottoms shall be level to +/-1/4" 36" above the trench bottom) in all directions) ~ inches below pipe Pump Requirements: ______ft. TDH vs. __ Aggregate Depth: - inches above pipe GRAVITY TO D-BOX EBUAL OFSTRIBUTION 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. Authorized State Agent: ____ ANDREW CORRIN

Harnett County Department of Public Health Site Sketch

Property Location: 209 JEWELL LN . (FESTUS TOAD . ST 1560)		
Issued To: DURANE CURRIN Subdivision TEZ TOP		Lot # 16
war-wall our	_	201. 2/200
Authorized State Agent:	_ Date:	08/03/2621
* GRAVITY TO B-BOX EGUAL DISTURDION		
* SYS. FLAGGED ONSITE (BLUE, WHITE, BLUE)		
* UTILITIES [WATER/AWEN] SHALL BE ZOUTED ON RT	SIDE	OF LOT
138,		
AT-CZADE X		
D TENCTION		
TEDA. 2 ATEA		
70'		
5 + 35 - 50 ML - 36'		
SC EDENTO O 14'		
3 3 6		
Par Basi		
ATEC LINE O		
1/8/		
HALL BE ROUTES		
DOWN DIM LA		
SEWELL CAME		

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