

**Harnett County Department of Public Health
Improvement Permit**

A building permit cannot be issued with only an Improvement Permit.

PROPERTY LOCATION 31 Georgie Dr (SR1273)

SUBDIVISION

Site improvements required prior to Construction Authorization issuance

LOT #

ISSUED TO **Josh Bryant**

NEW REPAIR EXPANSION

Type of Structure **53' x 28' Modular**

Proposed Wastewater System Type **25% reduction**

Projected Daily Flow **360**

GPD

Number of Bedrooms **3**

Number of Occupants **6**

SUBDIVISION

Basement Yes No

Pump Required Yes No May be required based on final locator and elevations of facilities

Type of Water Supply Community Public Well

Distance from well _____ feet

Permit valid for

five years

No expiration

Permit conditions:

Authorized State Agent:

Moh D. reh

Date:

7-19-22

SEE ATTACHED SITE SKETCH

The undersigned, being duly sworn, do solemnly declare and say that the premises described above are the true and exact location of the proposed structure or improvement. The permit holder is responsible for consulting with appropriate permitting bodies in meeting their requirements. No changes in the plans or site shall be made without written permission of the Harnett County Health Department. Any changes in the plans or site shall be reported to the Harnett County Health Department. The permit holder shall be liable for any penalties imposed by the Harnett County Health Department due to violation of this permit.

Construction Authorization

(Required for Building Permit)

The following conditions apply to the issuance of this permit. If any condition is violated, the permit may be revoked or suspended. The permit holder shall be liable for any penalties imposed by the Harnett County Health Department due to violation of this permit.

ISSUED TO **Josh Bryant**

PROPERTY LOCATION 31 Georgie Dr (SR1273)

LOT #

SUBDIVISION

Facility Type **53' x 28' Modular**

New

Expansion

Repair

Basement? Yes No Basement Future? Yes No

Type of Wastewater System? **25% reduction**

(Initial) Wastewater Flow **360**

GPD

(See note below if applicable)

25% reduction

(Repair)

Installation Requirements (Land Use)

Septic Tank Size **1000** gallons

Number of trenches **4**

Trench length of each trench **45** feet

Trench Spacing **9** feet on center

Pump Tank Size _____ gallons

Trenches shall be installed on contour at a

Soil Cover **6** inches

25% reduction

Maximum trench depth of **18"-24"** inches

(Maximum soil cover shall not exceed

trench bottom) **18"** above the trench bottom

trench bottom shall be level to **+/- 1/4**

inch all directions

inches below pipe

Pump requirement **1/2 HP**

GPM

Aggregate Depth

inches above pipe

Condition:

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**

The undersigned, being duly sworn, do solemnly declare and say that the premises described above are the true and exact location of the proposed structure or improvement. The permit holder shall be liable for any penalties imposed by the Harnett County Health Department due to violation of this permit.

On or before **Revised** **2022-07-19** **2022**

Date:

SEE ATTACHED SITE SKETCH

On or before **2022-07-19** **2022**

Date:

7-19-22

7-19-22

Construction Authorization Expires **7-19-22**

*Revised
for ST
& Front Deck*

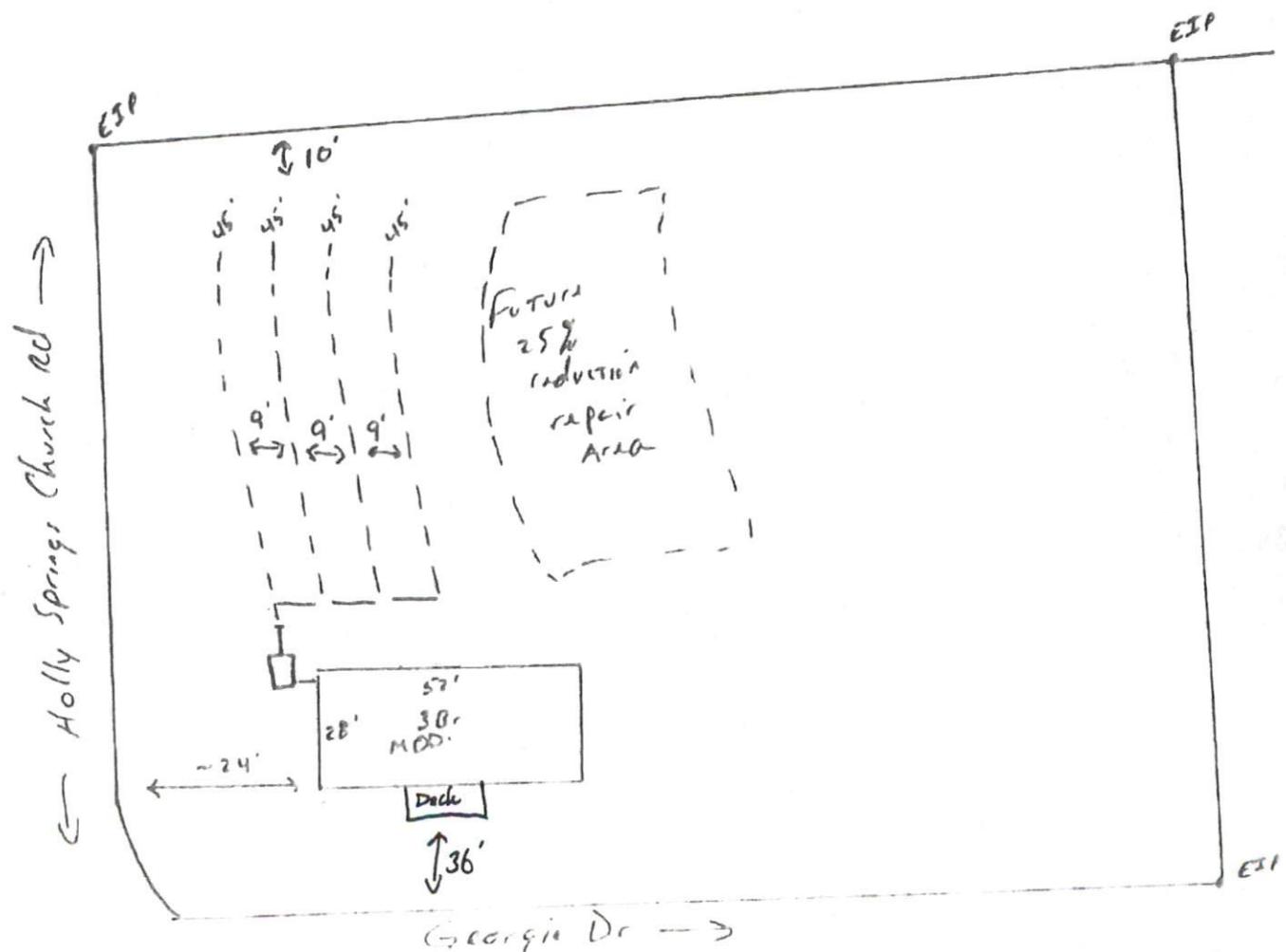
Application # BRES2107-0039 Revised

Harnett County Department of Public Health
Site Sketch

Property Location: 31 George Dr (SR1273)

Issued To: Josh Bryant Subdivision _____ Lot # _____

Authorized State Agent: Melvin R. Reed Date: 7-19-22



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