Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: 511 Owen Rd. (SR 1539) ISSUED TO: Katrina Littlejohn SUBDIVISION EXPANSION REPAIR Site Improvements required prior to Construction Authorization Issuance: Type of Structure: 3-Bedroom 76x26.8 DWMH Proposed Wastewater System Type: 25% Reduction Sys. Projected Daily Flow: 360 Number of bedrooms: 3 Number of Occupants: 6 Basement Yes May be required based on final location and elevations of facilities Pump Required: Yes X No Permit valid for: X Five years ✓ Public
✓ Well Distance from well 50+ feet Type of Water Supply: Community ■ No expiration Permit conditions: Ext. Well (EH2206-0005) shall be abandoned prior to Operation Permit Issued 06/24/2022 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: 511 Owen Rd. (SR 1539) ISSUED TO: Katrina Littlejohn SUBDIVISION Facility Type: 3-Bedroom 76x26.8 DWN Expansion Basement? Yes X No Basement Fixtures? Yes 25% Reduction System (Initial) Wastewater Flow: 360 GPD Type of Wastewater System** (See note below, if applicable) 25% Reduction System Number of trenches 3 Installation Requirements/Conditions Trench Spacing: 9 Septic Tank Size 1000 gallons Exact length of each trench 80 Feet on Center Trenches shall be installed on contour at a Soil Cover: 6 Pump Tank Size _____ 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) Pump Requirements: _____ ft. TDH vs. inches below pipe Aggregate Depth: NA inches above pipe Conditions: Gravity to D-Box Equal Distribution Required 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. Date: 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: Construction Authorization Expiration Date: 06/24/2027 ANDREW CURLED

Harnett County Department of Public Health Site Sketch

