	Bres	2204-	00.
App#			

Harnett County Department of Public Health

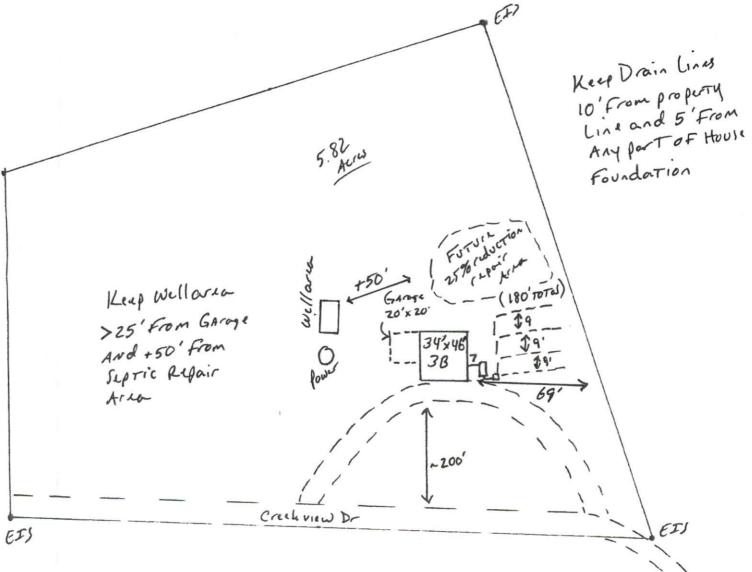
Revised for House Size

Improvement Permit

A DU	PROPERTY LOCATION: 745 Creekview Dr (SR 2039)
ISSUED TO: Elizabeth Aragon	SUBDIVISION LOT #
NEW REPAIR EXPANSION	
Type of Structure: 34'x46' SFD	
Proposed Wastewater System Type: 25% reduction	
Projected Daily Flow: 360 GPD	
Number of bedrooms: 3 Number of Occupan	s: <u>6</u> max
Basement Yes X No	
Pump Required: Yes No May be required	based on final location and elevations of facilities
Type of Water Supply: Community Public 2	Well Distance from well feet Permit valid for: 🗵 Five years
Permit conditions:	No expiration
Authorized State Agent:: Mah M	REHT Date: 09-23-22 SEE ATTACHED SITE SKETCH
	s 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 char	ges. 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	
	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: Elizabeth Aragon	PROPERTY LOCATION: 745 Creekview Dr (SR 2039)
	SUBDIVISIONLOT #
Facility Type: 34'x46' SFD	New □ Expansion □ Repair
	CONTRACTOR AND ADDRESS OF THE PROPERTY OF THE
Type of Wastewater System** 25% reductio	(IIIIIai) Wastewater Flow. 300 Of D
(See note below, if applicable)	76 - 175
25% reduction	\\\ \tag{\tag{\tag{\tag{\tag{\tag{\tag{
	Number of trenches 1
Septic Tank Size 1000 gallons	Exact length of each trench 180feet
,	Trenches shall be installed on contour at a Soil Cover: 6inches
	Maximum Trench Depth of: 18-26 inches (Maximum soil cover shall not exceed
	(Trench bottoms shall be level to +/-1/4" 36" above the trench bottom)
	100 100 100 100 100 100 100 100 100 100
	in all directions)
Pump Requirements:ft. TDH vs	GPM inches below pipe
	Aggregate Depth:inches above pipe
Conditions:	inches total
	TOTAL CROSS AND DADE OF CERTIC CVCTESS OR DEDAID ADDA
The state of the s	10FT. FROM ANY PART OF SEPTIC SYSTEM OR REPAIR AREA.
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DR	AIN FIELD AREA.
**If applicable: 1 understand the system type specified in	is different from the type specified on the application. I accept the specifications of this permit.
	Date
Owner/Legal Representative Signature:	Date:
	t, or the intended use changes. The Construction Authorization shall not be transferred when there is a change in ownership of the site. This he laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit. SEE ATTACHED SITE SKETCH
Construction Authorization is subject to compliance with the provisions of t	the Laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit. SEE ATTACHED SITE SKEICH
1//	1 - 45
Authorized State Agent: John M	
, ,	Construction Authorization Expiration Date: 09-23-27

Harnett County Department of Public Health Site Sketch

roperty Location: 745 Creekview Dr. (S sued To: Elizabeth Aragon	Subdivision		Lot #
uthorized State Agent: Mal	In REHS	D	Pate: 9-23-22
		6 2	



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