

## Harnett County Department of Public Health

Improvement Permit

A building permit can	ot be issued with only an Improvement Permit		
ISSUED TO JAMES W WALKER	PROPERTY LOCATION: 5n 1500 Beffel CHUNEA RY		
3 - 5 - 5	SUBDIVISION LOT #		
NEW REPAIR EXPANSION	Site Improvements required prior to Construction Authorization Issuance:		
Type of Structure: DwnH			
Proposed Wastewater System Type: 25% 130 0000			
Projected Daily Flow: 480 GPD			
Number of bedrooms: Number of Occupants: 2	max		
Basement (Yes No			
Pump Required: Yes No May be required based on final I Type of Water Supply: Community Public Well Distant			
	No expiration		
Permit conditions:	The expiration		
2 1 1 /	11-2-22		
Authorized State Agentin Somes C Manhoret	Date: 10-13-72 SEE ATTACHED SITE SKETCH		
	permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This		
	Permit shall not be affected by a change in ownership of the site. This permit is subject to comphance with the provisions of		
the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit			
Constr	uction Authorization		
(Re	uired for Building Permit)		
The state of the s	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: JAmes W Walken	PROPERTY LOCATION: 5x 1500 Bellel CHENCE RD		
155010 10. 9777-05	SUBDIVISION LOT #		
Facility Type: Dwnt New	Expansion Repair		
Basement? Yes No Basement Fixtures? Yes	12 mg		
(See note below, if applicable )	)		
50% NEDU 4741			
Installation Requirements/Conditions Number of trend	20.1		
Septic Tank Size 1200 gallons Exact length of	each trench		
Pump Tank Sizegallons Trenches shall b	e installed on contour at a Soil Cover:		
Maximum Trench	Depth of: 22-19 inches (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 vsGPM	inches below pipe		
rump requirements.	Aggregate Depth: 2 inches above pipe		
(fi	13		
Conditions:			
WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM A	NY PART OF SEPTIC SYSTEM OR REPAIR AREA.		
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD ARE	Α.		
**W applicable: I understand the system type specified is different from	the type specified on the application. I accept the specifications of this permit.		
in appreciate. I understand the system type specimed is directly from	the type specified bit the appreciation. I accept the specifications of any perimi.		
O O I Berry G	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  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.  SEE ATTACHED SITE SKETCH			
	0		
5 01 1	11-2-22		
Authorized State Agent: Janes & Marshon Har 1808 Date: 10-13-22			
Construction Authorization Expiration Date: 10 13 27			
11-2-27			

## Harnett County Department of Public Health Site Sketch

Property Location: 51/500 Bethel CHUNCK 12)		
Issued To: Tames W Walker Subdivision		Lot #
Authorized State Agent: Manhan & 1818	Date:	10-13-22
		11-2-22

