Harnett County Department of Public Health

Improvement Permit

A bunding permit can	PROPERTY LOCATION: 5n 1500 Belfal CHUNEAT RD
ISSUED TO: JAMES W WALKER	SUBDIVISION LOT #
NEW REPAIR EXPANSION	Site Improvements required prior to Construction Authorization Issuance:
Type of Structure: DwmH	
Proposed Wastewater System Type: 25% 1000 0000	
Projected Daily Flow: 480 GPD	
Number of bedrooms: Number of Occupants:	max
Basement Ores No	
Pump Required: Yes No May be required based on final I	
Type of Water Supply: Community Public Well Distar	nce from wellfeet Permit valid for: Tive years No expiration
Permit conditions:	— no expiration
211/	WI NAS
Authorized State Agent: Ames Manhores	Date: 10 - 13 - 22 SEE ATTACHED SITE SKETCH
	er permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This
site is subject to revocation of the site plan, plat, or the intended use changes. The Improvement the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.	Permit shall not be affected by a change in ownership of the site. This permit is subject to compliance with the provisions of
the carry and roles for straight retained and original and to conditions of this period.	
Constr	ruction Authorization
(19)	
	quired for Building Permit) . 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/500 Bellel CHURCH RD SUBDIVISION LOT #	
Facility Type: Dwart T New	Expansion Repair
	Expansion Repair
Basement? Yes No Basement Fixtures? Yes Type of Wastewater System** 25% 103-00 Co Tun)	
Control of the Contro	(IIIItiai) Wastewater 110W. 700 OF D
(See note below, if applicable 1)	(Repair)
Installation Requirements/Conditions Number of trend	
Septic Tank Size 1200 gallons Exact length of	72.3
	e installed on contour at a Soil Cover:
1	Depth of: 22-19 inches (Maximum soil cover shall not exceed
	shall be level to +/-1/4" 36" above the trench bottom)
in all directions)	inches below pipe
Pump Requirements:ft. TDH vsGPM	
e real	Aggregate Depth:
Conditions:	
WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT FROM A	ANY DADT OF CERTIC CYCTEM OR REPAIR AREA
WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM A	
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD ARE	A.
**If applicable: 1 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:	Date:
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.	
5 al 1 Mariens	
Authorized State Agent: Date: 10-13-22	
	truction Authorization Expiration Date: 10 +3 - 27

Harnett County Department of Public Health Site Sketch

Property Location: 51/500 Bettel CHUNCK 121)

Issued To: Tames W Walker Subdivision Lot#

Authorized State Agent: Manhan Date: 10-13-22

