Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

	ERTY LOCATION: 65 LONEST	ar Ct		
	DIVISION		LOT #	
NEW ☑ REPAIR ☐ EXPANSION ☐	Site Improvements req	uired prior to Construction Authoriz	ration Issuance:	
Type of Structure: Man Home (23'x52')	•			
Proposed Wastewater System Type: 25% Reduction System				
Projected Daily Flow: 360 GPD				
Number of bedrooms: 3 Number of Occupants: 6 max				
Basement Yes No				
Pump Required: Yes No May be required based on final location	and elevations of facilities			
	m wellfeet	Permit valid for:	Five years No expiration	
The file of	0/00/00			
Authorized State Agent:: REALS	Date: 3/28/23		CHED SITE SKETCH	
The issuance of this permit by the Health Department in no way guarantees the issuance of other permit site is subject to revocation if the site plan, plat, or the intended use changes. The improvement Permit the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.	s. The permit holder is responsible for chec shall not be affected by a change in owner	king with appropriate governing bodies in ship of the site. This permit is subject to c	meeting their requirements. This ompliance with the provisions of	
Constructi	on Authorization			
	for Building Permit)			
The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .1957, .1958, with the attached system layout.		into this permit and shall be met. Systems	shall be installed in accordance	
ISSUED TO: Felicitas Lopez	PROPERTY LOCATION: 85 LO	nestar Ct		
	SUBDIVISION		LOT #	
	Expansion Repair			
Basement? Yes No Basement Fixtures? Yes				
Type of Wastewater System** 25% Reduction System		(Initial) Wastewater Flow: 3	360 GPD	
(See note below, if applicable ((IIIIIIai) Wastewater Flow.	dru	
25% Red Sys	/D:-\			
	(Repair)			
Installation Requirements/Conditions Number of trenches				
Septic Tank Size 1000 gallons Exact length of each t		Trench Spacing: 9	Feet on Center	
Pump Tank Sizegallons Trenches shall be insta	lled on contour at a	Soil Cover: 6-12 in	nches	
Maximum Trench Dept	h of: 18-24 inches	(Maximum soil cover shall no	ot exceed	
(Trench bottoms shall	be level to +/-1/4"	36" above the trench botto	om)	
in all directions)				
Pump Requirements:ft. TDH vsGPM			inches below pipe	
		Aggregate Depth:		
Conditions:		Aggregate Deptil.	inches total	
conditions.			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: [understand the system type specified is different from the ty	pe specified on the application.	I accept the specifications of ti	his 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 b	e transferred when there is a change in ow	nership 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.				
Authorized State Agent: Date: 3/28/23				
Construction Authorization Expiration Date: 3/28/28				
conpiració	. Addition Expiration D	att. VIZUIZU		

Harnett County Department of Public Health Site Sketch

Property Location: 85 Lones	star Ct	
Issued To: Felicitas Lopez	Subdivision	Lot #
Authorized State Agent:	RENS (OLIVER TOLKSPOTE)	Date: 3/28/23
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5xx5T.	1 REPAIR (52:423)	
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