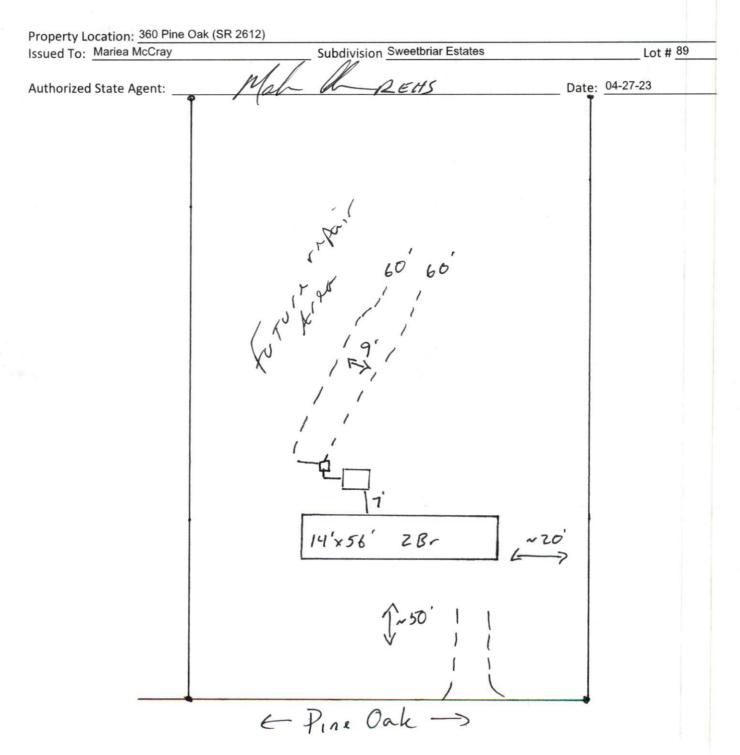
Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

William To Marina MaCray	PROPERTY LOCATION: 300 FILE		LOT # 89
ISSUED TO: Mariea McCray	SUBDIVISION Sweetbriar Es		
NEW REPAIR EXPANSION	Site improvements re	quired prior to Construction Author	inzation issuance:
Type of Structure: 14'x56' SFD (SWM H)			
Proposed Wastewater System Type: 25% reduction			
Projected Daily Flow: 240 GPD			
Number of bedrooms: 2 Number of Occupants: 4	max		
Basement Yes No			
	final location and elevations of facilities	D : C1/	□ r
Type of Water Supply: Community N Public Well	Distance from wellfeet	Permit valid for:	Five years
Permit conditions:			No expiration
// /			
Authorized State Agent:: Moh de RE	145 Date: 04-27-23	SEE AT	TACHED SITE SKETCH
Authorized State Agent:: The issuance of this permit by the Health Department in no way guarantees the issuance of the permit by the Health Department in no way guarantees the issuance of this permit by the Health Department in no way guarantees the issuance of this permit by the Health Department in no way guarantees the issuance of this permit by the Health Department in no way guarantees the issuance of this permit by the Health Department in no way guarantees the issuance of this permit by the Health Department in no way guarantees the issuance of this permit by the Health Department in no way guarantees the issuance of this permit by the Health Department in no way guarantees the issuance of this permit by the Health Department in no way guarantees the issuance of this permit by the Health Department in no way guarantees the issuance of this permit by the Health Department in no way guarantees the issuance of this permit by the Health Department in no way guarantees the issuance of this permit by the Health Department in no way guarantees the issuance of the permit by the Health Department in no way guarantees the issuance of the permit by the Health Department in no way guarantees the instance of the permit by the Health Department in the			
site is subject to revocation if the site plan, plat, or the intended use changes. The Im	and the same of the control of the c		
the Laws and Rules for Sewage Treatment and Disposal and to conditions of this perm	4		
(onstruction Authorization		
2	ASST DESCRIPTION OF THE PROPERTY OF THE PROPER		
The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .19	(Required for Building Permit)	r into this normit and shall he met Sustan	ne chall be installed in accordance
with the attached system layout.	10, 1757, 1750. and 1757 are incorporated by reference	s into this permit and shall be met. System	ns shall be instance in accordance
Section and Sectio			
ISSUED TO: Mariea McCray	PROPERTY LOCATION: 360	<u> Pine Oak (SR 2612</u>	
	SUBDIVISION Sweetbria	r Estates	LOT # 89
Facility Type: 14'x56' SFD	New Expansion Repair		
Basement? Yes No Basement Fixtures?			
Type of Wastewater System** 25% reduction		(Initial) Wastewater Flow	240 GPD
(See note below, if applicable)		(Illitial) Wastewater Flow	
25% reduction	(Pagain)		
	(Repair)		
	of trenches 2	0	
	gth of each trench 60 feet	Trench Spacing: 9	
	shall be installed on contour at a	Soil Cover: 6	_inches
Maximun	Trench Depth of: 18-24 inches	(Maximum soil cover shall	not exceed
(Trench	ottoms shall be level to +/-1/4"	36" above the trench bo	ottom)
in all di	ections)		
Pump Requirements:ft. TDH vsGPM			inches below pipe
		Aggregate Depth:	inches above pipe
Conditions:		00 0	inches total
Conditions.			
WATER LINES (INCLUDING IRRIGATION) MUST BE JOST 1	DOM ANY DART OF CERTIC CVCTFM OR	DEDAID ADEA	
WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. F		KEPAIK AKTA.	
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIE	D AREA.		
**If applicable: I understand the system type specified is different	t from the type specified on the application	n. I accept the specifications of	f this permit.
	, , , , , , , , , , , , , , , , ,	7	s table Karanasa
Owner/Legal Representative Signature:		Date:	
This Construction Authorization is subject to revocation if the site plan, plat, or the in	nded use changes. The Construction Authorization shall no		ownership of the site. This
Construction Authorization is subject to compliance with the provisions of the Laws and			E ATTACHED SITE SKETCH
and the provision of the law and	and to the toll	J. Mary P. Charles	THE PROPERTY OF THE PARTY OF TH
in I /	1-11-	04 27 22	
Authorized State Agent: Mah	Date: Construction Authorization Expiration	04-27-23	

Harnett County Department of Public Health Site Sketch



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