

**Improvement Permit**

Craig Taylor Const  
or  
Bobby Thomas

A building permit cannot be issued with only an Improvement Permit

ISSUED TO: Bobby Thomas PROPERTY LOCATION: McLeod Rd  
SUBDIVISION: \_\_\_\_\_ LOT # \_\_\_\_\_

NEW  REPAIR  EXPANSION  Site Improvements required prior to Construction Authorization Issuance: 18.43 ac

Type of Structure: SFD-89x49 3BR

Proposed Wastewater System Type: Gravel

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

Type of Water Supply:  Community  Public  Well Distance from well 50 feet Permit valid for:  Five years  No expiration

Permit conditions: STUB out Plumbing shallow, At ground level or higher, Where shown, maintain All set BACK - Do not grade or cut Area marked by my flag. Do not DRIVE OR PARK on septic system

Authorized State Agent: J. W. [Signature] Date: 03-14-07 SEE ATTACHED SITE SKETCH

The issuance of this permit by the Health Department in no way guarantees 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 changes. 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 this permit.

**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: Bobby Thomas PROPERTY LOCATION: McLeod Rd  
SUBDIVISION: \_\_\_\_\_ LOT # 18.43 ac

Facility Type: SFD-89x49-3BR  New  Expansion  Repair

Basement?  Yes  No Basement Fixtures?  Yes  No

Type of Wastewater System\*\* Gravel (Initial) Wastewater Flow: 360 GPD

(See note below, if applicable ) 480 LF of LPP Repair (Repair)

**Installation Requirements/Conditions**

Septic Tank Size <u>1000</u> gallons	Exact length of each trench <u>14400</u> feet	Trench Spacing: <u>9</u> Feet on Center
Pump Tank Size _____ gallons	Trenches shall be installed on contour at a Maximum Trench Depth of: <u>18 max</u> inches (Trench bottoms shall be level to +1-1/4" in all directions)	Soil Cover: <u>6</u> inches (Maximum soil cover shall not exceed 36" above the trench bottom)
Pump Requirements: _____ ft. TDH vs. _____ GPM		Aggregate Depth: <u>6</u> inches below pipe <u>2</u> inches above pipe <u>12</u> inches total
Conditions: _____		

\*\*If applicable: I 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.

Authorized State Agent: J. W. [Signature] Date: 03-14-07 SEE ATTACHED SITE SKETCH

Construction Authorization Expiration Date: 03-14-2012

HTE# 07-500/6976

Permit # 23698

# Harnett County Department of Public Health

## Site Sketch

Craig Taylor Const  
or

PROPERTY LOCATION: McLeod Rd

ISSUED TO: Dobby Thomas

SUBDIVISION \_\_\_\_\_

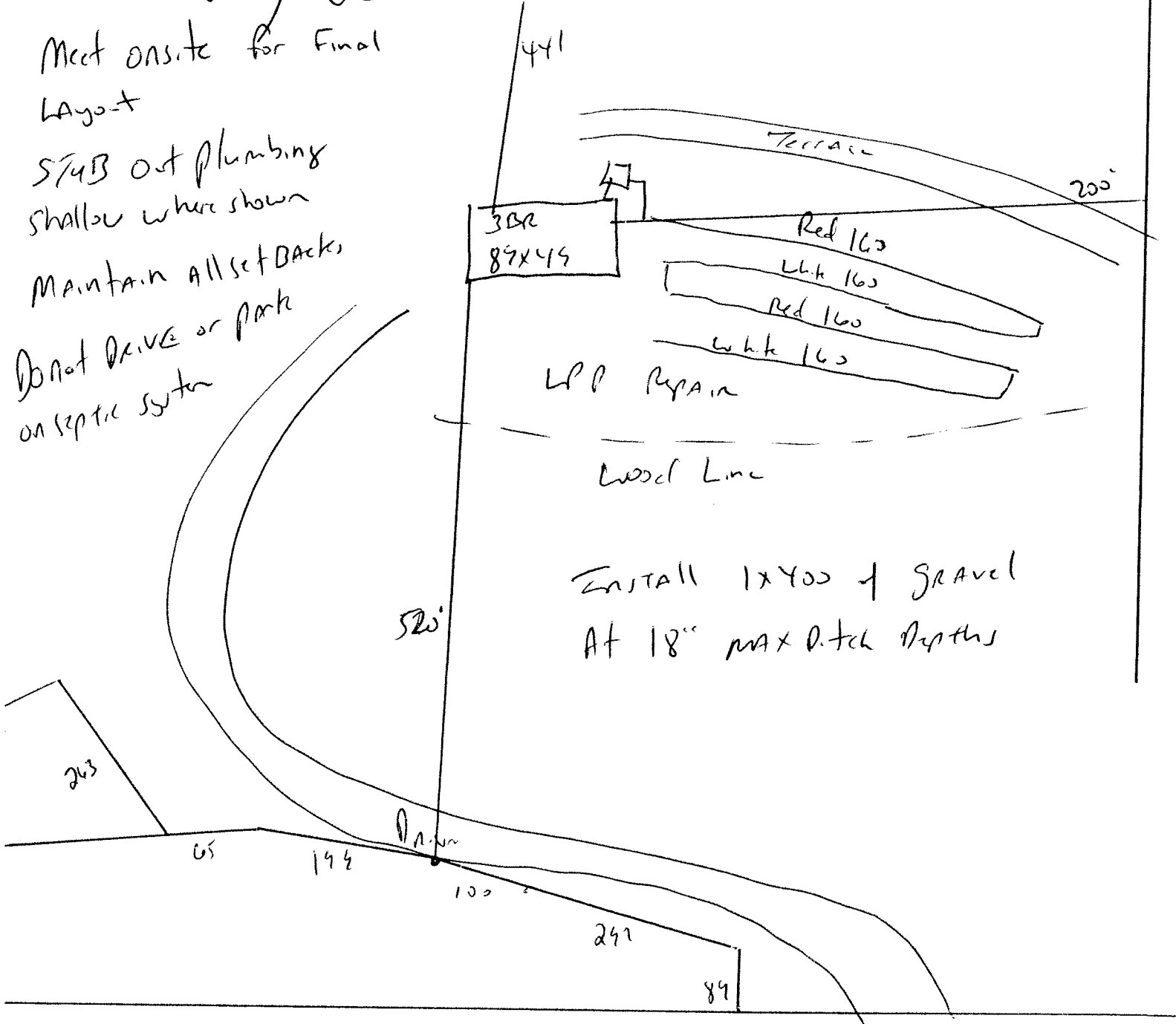
LOT # \_\_\_\_\_

Authorized State Agent: J. L. ANI

Date: 03/14/07

18.43ac

Meet onsite for Final  
Layout  
STUB out plumbing  
shallower where shown  
Maintain all setbacks  
Don't Drive or Park  
on septic system



McLeod Rd