30089

HTE# 18-5-4352912

Harnett County Department of Public Health

Improvement Permit

A	building permit cannot be issued with only an Improvement Permit	100 1000
ISSUED TO: Tim McNeill	PROPERTY LOCATION: 81 Hollies Pines 12.	(S/C6/40)
NEW ☐ REPAIR ☐ EXPANSION	SUBDIVISION SUBDIVISION	LOT # <u>ZR</u>
Type of Structure: 40'x 24' Metal Bldg		zation Issuance:
Proposed Wastewater System Type: 3590 Ned	wition Sig / Compational	
Projected Daily Flow: 100 GPD	35.7 20.10	
· · · · · · · · · · · · · · · · · · ·	ants: NA max	
Basement Yes No	THE	
Pump Required: ☐Yes ☐ No ☐ May be requir	red based on final location and elevations of facilities	
Type of Water Supply: Community Public	☐ Well Distance from well feet Permit valid for:	Five years
Permit conditions:		☐ No expiration
1 Employee 0/ Singl	le Buthoom at 100 GPD	ш но ехришной
	08/23/2018	
Authorized State Agent::	Date: STATA 2018 616 SEE ATTA	CHED SITE SKETCH
The issuance of this permit by the Health Department in no way guarant	tees the issuance of other permits. The permit holder is responsible for checking with appropriate governing bodies in	meeting their requirements. This
the Laws and Rules for Sewage Treatment and Disposal and to conditions	anges. The Improvement Permit shall not be affected by a change in ownership of the site. This permit is subject to c	ompliance with the provisions of
	Construction Authorization	
	Construction Authorization	
The construction and installation with a CD I 1979 1979 1979	(Required for Building Permit)	
with the attached system layout.	54, 1955, 1956, 1957, 1958. and 1959 are incorporated by references into this permit and shall be met. Systems s	shall be installed in accordance
ISSUED TO: Tim McNeill	PROPERTY LOCATION: 81 Hollies Pines (W. (sa 1270
1 7 7	SUBDIVISION	LOT # 28
Facility Type: 40 × 24' Metal 31dg.	New ☐ Expansion ☐ Repair	
Basement? Yes No Basement Fixtu		
Type of Wastewater System**	e 25% Red. Sys. Con Vo (Initial) Wastewater Flow:	CPD GPD
(See note below, if applicable		
	a 25% red (Repair) * Conventional OR	timx
Installation Requirements/Conditions	Number of trenches 2	0.01/1
Septic Tank Size \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		Feet on Center
Pump Tank Size gallons		
ganons	11)	
	\	
	(Trench bottoms shall be level to +/-1/4" 36" above the trench bottom	m)
Duna Danimum (TDU	in all directions)	
Pump Requirements:ft. TDH vs		inches below pipe
() () () () () ()	Aggregate Depth:	inches above pipe
Conditions: 6IN Imported F	Ippould Lover regulated 1	inches total
WATER LINES (INCLUDING IRRIGATION) MUST BE	TOFT. FROM ANY PART OF SEPTIC SYSTEM OR REPAIR AREA.	
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DR	AIN FIELD AREA.	
** If annicable: I understand the system type specified	is different from the time considered on the application I amend the in it is	
The applicable. I understand the system type specified h	is different from the type specified on the application. I accept the specifications of the	is permit.
Owner/Legal Representative Signature:		
	Date:	
onstruction Authorization is subject to revocation if the site plan, plan	t, or the intended use changes. The Construction Authorization shall not be transferred when there is a change in own	
Authorization is subject to compilative with the provisions of the	he Laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit.	TACHED SITE SKETCH
hadraid Control of the Control	The second of the second	a colonia la conc
Authorized State Agent:		08/23/298
ANDRIEW WRA	Construction Authorization Expiration Date (ALC) 7/17/2023	08/23/2023

Harnett County Department of Public Health Site Sketch

