

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

ISSUED TO: ROBERT BRACKLEY
PROPERTY LOCATION: BLUFF RIDGE LN
SUBDIVISION: THE BLUFFS @ CROSS LINKS LOT # 2
Type of Structure: SFD (38'x87)
Proposed Wastewater System Type: Pump To 25% REDUC. IN
Projected Daily Flow: 360 GPD 360 max 6
Number of bedrooms: 3 Number of Occupants: 6 max 6
Basement: No
Pump Required: Yes
Type of Water Supply: Public
Permit valid for: Five years

Authorized State Agent: [Signature] Date: 10/20/16
The issuance of this permit by the Health Department in no way guarantees the issuance of other permits.
SEE ATTACHED SITE SKETCH

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.

ISSUED TO: ROBERT BRACKLEY
PROPERTY LOCATION: BLUFF RIDGE LN
SUBDIVISION: THE BLUFFS @ CROSS LINKS LOT # 2
Facility Type: SFD (38'x87) New
Basement? Yes
Type of Wastewater System: Pump To 25% REDUC. IN SYSTEM (Initial) Wastewater Flow: 360 GPD
PROPOSEMENT (Repair)

Installation Requirements/Conditions
Septic Tank Size 1000 gallons
Pump Tank Size 1000 gallons
Number of trenches 5 x 5 90
Exact length of each trench 90 feet
Trench Spacing: 9 Feet on Center
Soil Cover: 6 inches
Maximum Trench Depth of: 12 inches
Pump Requirements: ft. TDH vs. GPM
Aggregate Depth: inches below pipe, inches above pipe, inches total
Conditions: THIS SYSTEM MUST BE INSTALLED BY A LICENSED SEPTIC INSTALLER PER NC LAW. THIS PERMIT BASED ON PERMIT 21995

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: 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. SEE ATTACHED SITE SKETCH

Authorized State Agent: [Signature] Date: 10/20/16
Construction Authorization Expiration Date: 10/20/21

HTE# 16-5-39763RR

Permit # 29046

# Harnett County Department of Public Health Site Sketch

ISSUED TO: ROBERT BRACKETT PROPERTY LOCATOR: BLUFF RIDGE LN  
SUBDIVISION THE BLUFFS & CROSSLINGS LOT # 2

Authorized State Agent: ~~REMS (OLIVER TOLKSON)~~ Date: 10/23/16

~~REMS 2/16/17~~  
~~REMS 1/25/19~~

\*SEE CA FOR NUMBER OF LINES  
1/25/19 REVISION BACK TO 3 BEDROOMS

