HTE# 12-5-29261

Harnett County Department of Public Health

Improvement Permit

27117

	A building permit cannot be issued w	ith only an Improvement ATION: こんん ケィ	Permit L P	
ISSUED TO: Kenneth Most	SUBDIVISION _			LOT # J
/	ON		quired prior to Construction Auth	
Type of Structure: SFD 24456	UN	one improvements rec	funca prior to construction had	orization issuance.
Proposed Wastewater System Type: 25 7 Radioc	tion System			
Projected Daily Flow: 360 GPD				
Number of bedrooms: Number of Occi	ipants: 6 max			
Basement Yes No				
Pump Required: □Yes ☑ No □ May be req	uired based on final location and elev	ations of facilities		,
	☐ Well Distance from well _		Permit valid for:	✓ Five years☐ No expiration
		, ,		
Authorized State Agent::	Date:			TTACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guar site is subject to revocation if the site plan, plat, or the intended use the Laws and Rules for Sewage Treatment and Disposal and to condition	changes. The Improvement Permit shall not be			
	Construction Au	<u>uthorization</u>		
	(Required for Buil	ding Permit)		
The construction and installation requirements of Rules .1950, .1952, . with the attached system layout.	1954, .1955, .1956, .1957, .1958. and .1959	are incorporated by references	into this permit and shall be met. Syste	ms shall be installed in accordance
ISSUED TO: Kejneth Moss	PROPERT SUBDIVIS	Y LOCATION: <u>C. P.</u>	Stewart Rd.	10T # 2
Facility Type: SFD 24x56			Parker	لا الکا
	New Expa	nsion 🗌 Repair		
	xtures? \(\text{Yes} \) \(\text{No} \)		(1.1.1.N.144	310000
Type of Wastewater System** 25 95 Res	duction Systen		(Initial) Wastewater Flow	: <u> </u>
(See note below, if applicable □)	etion System	(B. 1.)		
	/	(Repair)		
Installation Requirements/Conditions	Number of trenches	<u> </u>	· · · · · · · · · · · · · · · · ·	
Septic Tank Size / OOO gallons	Exact length of each trench _		Trench Spacing: 9	
Pump Tank Size gallons	Trenches shall be installed on		Soil Cover: 6-10	
	Maximum Trench Depth of:		(Maximum soil cover shal	
	(Trench bottoms shall be level	to +/-1/4"	36" above the trench be	ottom)
	in all directions)			
Pump Requirements:ft. TDH vs	GPM			inches below pipe
0	1		Aggregate Depth:	inches above pipe
Conditions: Run drainlines on	contour		water	inches total
WATER LINES (INCLUDING IRRIGATION) MUST		SEPTIC SYSTEM OR	REPAIR AREA.	
NO UTILITIES ALLOWED IN INITIAL OR REPAIR	UKAIN FIELU AKEA.			
**If applicable: / understand the system type specifie	d is different from the type speci	fied on the application	. I accept the specifications o	f this permit.
Owner/Legal Representative Signature: This Construction Authorization is subject to revocation if the site plan			Date:	
			4-	
Construction Authorization is subject to compliance with the provisions	of the Laws and Rules for Sewage Treatment a	and Disposal and to the condit	ions of this permit. SE	E ATTACHED SITE SKETCH
Authorized State Agent:	Lain LEHS	Date:	7/18/2012	
		orization Expiration (Date: 7/18/24/7	

Harnett County Department of Public Health Site Sketch

3	PROPERTY LOCATION: C.P. Stewart Rd.	
ISSUED TO: Kenneth Moss	SUBDIVISION John E. Parker	LOT # _ 3
Authorized State Agent: Ann.	-/	
Authorized State Agent: Lynn Milwain	<u> LiAS</u> Date: 7/18/24	<u>2</u>

