HTE#14-5-34916

Harnett County Department of Public Health

28165

Improvement Permit

A building permit cannot be issued with only an Improvement Permit	
PROPERTY LOCATION: DICKENS RO	
ISSUED TO: LONDIE & STIRLEY TOWNSON SUBDIVISION	_ LOT #
NEW REPAIR EXPANSION Site Improvements required prior to Construction Authorization I	ssuance:
Type of Structure: Home (17 ×65')	
Proposed Wastewater System Type: Conversion BL	
Projected Daily Flow: GPD	
Number of bedrooms: Number of Occupants: Hand	
Basement \square Yes \nearrow No	
Pump Required: 🗆 Yes 💢 No 🖂 May be required based on final location and elevations of facilities	
	Five years
Permit conditions:	No expiration
Authorized State Agent: Date: 12814 SEE ATTACHED S	
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 to the permit holder is responsible for checking with appropriate governing bodies in meeting to the permit holder is responsible for checking with appropriate governing bodies in meeting to the permit holder is responsible for checking with appropriate governing bodies in meeting to the permit holder is responsible for checking with appropriate governing bodies in meeting to the permit holder is responsible for checking with appropriate governing bodies in meeting to the permit holder is responsible for checking with appropriate governing bodies in meeting to the permit holder is responsible for checking with appropriate governing bodies in meeting to the permit holder is responsible for checking with appropriate governing bodies in meeting to the permit holder is responsible for checking with appropriate governing bodies in meeting to the permit holder is responsible for checking with appropriate governing bodies in meeting to the permit holder is responsible for checking with appropriate governing bodies in meeting to the permit holder is responsible for checking with appropriate governing bodies in the permit holder is responsible for the permit holder is respon	
site is subject to revocation if the site plan, plat, or the intended use changes. The Improvement Lexinit shall not be affected by a change in ownership of the site. This permit is subject to compliance the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.	with the provisions of
the Lans and holes for senage freatment and disposal and to conditions of this period.	
<u>Construction Authorization</u>	
(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 in	nstalled in accordance
with the attached system layout.	
ISSUED TO: LONNIE & SHIRLEY JOIANSON PROPERTY LOCATION: DICKENS RO	
·	
	LOT #
Facility Type: Home (17×65) New Expansion Expansion	
Basement? Yes No Basement Fixtures? Yes No	
Type of Wastewater System** CONVENTIONAL (Initial) Wastewater Flow: 24	O GPD
(See note below, if applicable \square)	
CONVENTIONAL (Repair)	
Installation Requirements/Conditions Number of trenches 3	
Manual of Belleton	c .
	n Center
Pump Tank Size gallons Trenches shall be installed on contour at a Soil Cover: inches	
Maximum Trench Depth of: $\cancel{R} \cdot 3 \cancel{C}$ inches (Maximum soil cover shall not exce	ed
(Trench bottoms shall be level to $\pm 1/4$ " 36" above the trench bottom)	
in all directions)	
* · · · · · · · · · · · · · · · · · · ·	nches below pipe
Aggregate Depth:	
	• •
Conditions:	inches total
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 peri	nit.
Owner/Legal Representative_Signature:	
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 or	f 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: Date: 12/8/14	
344	ļ
Construction Authorization Expiration Date: 12 8 19	

Harnett County Department of Public Health Site Sketch

