HTE# 17-5-4 1825

Harnett County Department of Public Health

Improvement Permit

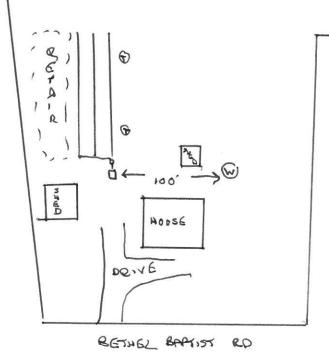
A	building permit cannot be issued with only an Imp	provement Permit	
C. MC -	PROPERTY LOCATION: BE	THEL BOOTIST RD	
ISSUED TO: CARL MaDONALD ?			LOT #
NEW REPAIR □ EXPANSION	I □ Site Improve	ments required prior to Construction Autho	rization Issuance:
Type of Structure: EXT. SED		W. 1	
Proposed Wastewater System Type: 25%. R601	KKION DYSTEM		
Projected Daily Flow: 360 GPD			
	ants: max		
Basement 🗆 Yes 🔀 No	-		
Pump Required: ☐Yes ☐ No ☐ May be required.	red based on final location and elevations of faciliti	ies	
Type of Water Supply: Community Public Permit conditions:	□ Well Distance from well 100	feet Permit valid for:	Five years No expiration
Authorized State Agentu	s and state		
Authorized State Agent:: The issuance of this permit by the Health Department in no way guarant	8675 Date: 7 28 1	SEE AT	TACHED SITE SKETCH
site is subject to revocation if the site plan, plat, or the intended use ch	anges. The Improvement Permit shall not be affected by a char	ible for checking with appropriate governing bodies in	meeting their requirements. This
the Laws and Rules for Sewage Treatment and Disposal and to conditions	of this permit.	ige in ownership of the site. This permit is subject to	compliance with the provisions of
	Company stiem Authorizati		
	Construction Authorization	<u>on</u>	
	(Required for Building Permit)		
The construction and installation requirements of Rules .1950, .1952, .195 with the attached system layout.	.4, .1955, .1956, .1957, .1958. and .1959 are incorporated by	references into this permit and shall be met. System.	s shall be installed in accordance
ISSUED TO: CARL McDongro ?		BETHEL BAPTIST B	The second water
	SUBDIVISION		LOT #
Facility Type: Ext. SFD		Repair	
Basement? Yes No Basement Fixtu	res? 🗆 Yes 🗆 No		
Type of Wastewater System** 25% R	Ires? Yes No	(Initial) Wastewater Flow:	360 GPD
(See note below, if applicable)			
25%	COUCTION SYS (Repair)		
Installation Requirements/Conditions	Number of trenches 3		
Septic Tank Size 1000 gallons		(T 9	F
The state of the s	Exact length of each trench 100	1 8	
Pump Tank Size gallons	Trenches shall be installed on contour at a		inches
		inches (Maximum soil cover shall	not exceed
	(Trench bottoms shall be level to +/-1/4"	36" above the trench bot	tom)
	in all directions)		,
Pump Requirements:ft. TDH vs			inches below pipe
	* (77.79)	Aggregate Depth:	
Conditions:			
Conditions.			inches total
WATER LINES (INCLUDING IRRIGATION) MUST BI	: 10FT. FROM ANY PART OF SEPTIC SYSTE	M OR REPAIR AREA.	
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DE			
**!(- 1: 1 / - / - / - / - / - / - / - / - / - /	. ""		
**If applicable: I understand the system type specified	is different from the type specified on the app	plication. I accept the specifications of	this permit.
Owner/Legal Representative Signature:		Date:	
Owner/Legal Representative Signature: This Construction Authorization is subject to revocation if the Site plan, pla	t, or the intended use changes. The Construction Authorization	shall not be transferred when there is a change in o	wnership of the site. This
Construction Authorization is subject to compliance with the provisions of			ATTACHED SITE SKETCH
	M		
Authorized State Agent:	RCHS	Date: 7/28/17	
The state right.	Canadiana	vaic.	
	Construction Authorization Expire	ation Date: / / 25/ 22	

HTE#	1	7-5	5-4	182	5
HTE#	1	1-5	5-4	185	5

Permit # 29685

Harnett County Department of Public Health Site Sketch

6 80 7	PROPERTY LOCATON:_	BETHEL	BAPTIST	Ro	
ISSUED TO: CARRY McDONGLO Je	SUBDIVISION				LOT #
		\) 1		s 2 70000 - 2 20 2000 -
Authorized State Agent: RENS (BLI)	NGC TOLKSOOP) Date	: 7 28 1	7	g
			1 1		



Department of Environment, Health and Natural Resources Division of Environmental Health On-Site Wastewater Section

Applicant:

Owner:

Address:

Sheet: Property ID: Lot #: File #: Code:

SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

Date Evaluated:

Water Evalua	sed-Facility: on of Site: Supply: tion Method of Wastewate	: Auge	` Desig Propo ☑ Public ☐ I	gn Flow (.1949): 36 erty Recorded: ndividual \bigcup Industrial I	Well Spring	Oth	er		
P R O F I	.1940		SOIL MORPHOLOGY .1941			OTHER PROFILE FACTORS			
L E #	Landscape Position/ Slope %	Horizon Depth (In.)	.1941 Structure/ Texture	.1941 Consistence Mineralogy	.1942 Soil Wetness/ Color	.1943 Soil Depth (IN.)	.1956 Sapro Class	.1944 Restr Horiz	Profile Class & LTAR
5	33 25	0-6	G 5L	who were					
		6-48	SBICC	172 5/38					P5 . 3
2	55	0-12	6 52	VERINS) VE					
		19-34	531c. C	VERNS) W B 5/50					¢5.3
		34	8m						
	l	1		1	1			1	

Description	Initial System	Repair System	Other Factors (.1946): Site Classification (.1948):
Available Space (.1945)	1 7	1	Evaluated By:
System Type(s)	25% 5	200	Others Present:
Site LTAR	. 3	.3	