30123

HTE# 18-544054

Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

		A building permit ca	PROPERTY LOCA	TION. COX Y	11LL RD	
ISSUED TO:	John Gross		SUBDIVISION	mon.		LOT #
NEW X	REPAIR	EXPANSION 🔀		Site Improvements req	uired prior to Construction Author	rization Issuance:
	Ex Missan					
Proposed Wastewate	er System Type: 25%	REDUCTION SY	STEM			
Projected Daily Flow	()) 40 GP	D				
Number of bedroom	is: Numbe	r of Occupants: 19	max			
Basement ☐Yes	No No			0 0 0 0000		
Pump Required:		y be required based on fina			B	¥
Type of Water Supp Permit conditions: _	oly: Community	Public Well Dis	tance from well	teet	Permit valid for:	Five years No expiration
	and the second					
Authorized State Age	ent::	SEH	Date:	6 13 18		TACHED SITE SKETCH
site is subject to revocat	nit by the Health Department in n ion if the site plan, plat, or the in Sewage Treatment and Disposal and	tended use changes. The Improvem	ther permits. The permi ent Permit shall not be	it holder is responsible for che affected by a change in owne	cking with appropriate governing bodies in schip of the site. This permit is subject to	n meeting their requirements. This compliance with the provisions of
		Cons	truction Au	ıthorization		
			Required for Build			
The construction and ins with the attached system	The state of the s	30, .1952, .1954, .1955, .1956, .19	757, .1958. and .1959 a	are incorporated by references	into this permit and shall be met. System	s shall be installed in accordance
ISSUED TO:	JOHN GROSS	i				
	- m	C . ~	SUBDIVISI	ON		LOT #
, ,,		5 CAMP X Nev	w 🔀 Expan	nsion \square Repair		
Basement?		ement Fixtures? Yes	□ No			111.6
Type of Wastewat		, REDVESTION	272,0W		(Initial) Wastewater Flow:	TI4 O GPD
(See note below, i	if applicable \Box)	0 0	(0)			
		· RED. Sys-		(Repair)		
Installation Requir			enches <u>5</u>		q	
Septic Tank Size _	0		of each trench _		Trench Spacing: 9	
Pump Tank Size _	gallons		be installed on o		Soil Cover: 6-12	inches
			nch Depth of:		(Maximum soil cover shall	
		1	ms shall be level	to +/-1/4"	36" above the trench bo	ttom)
		in all direction	ns)			
Pump Requiremen	ts:ft. TDH v	rs GPM				inches below pipe
					Aggregate Depth:	
Conditions:						inches total
WATER LINES (II	NCLLIDING IRRIGATION) MUST BE 10FT. FROM	ANY PART OF	SEPTIC SYSTEM OR	REPAIR AREA.	
		REPAIR DRAIN FIELD A		521 11C 51512 5K		
**If applicable: / //	understand the system type	e specified is different fro	om the type specia	fied on the application	. I accept the specifications of	this permit.
- II applicable!				7/	7	,
	esentative Signature:		77.6		Date:	tion of the city. This
		he site plan, plat, or the intended provisions of the Laws and Rules			be transferred when there is a change in ions of this permit.	E ATTACHED SITE SKETCH
		Illia				
Authorized State	Agent:	My 8	675	Date:	6 13 77	
		Co	Astruction Author	orization Expiration [Date: 6/13/23	

Harnett County Department of Public Health Site Sketch

