HTE# 17-5-42029 Harnett County Department of Public Health

29211

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

	PROPERTY LOCATION: G 277 NC 55 WA	
ISSUED TO: <u>C. Stephenson</u> NEW REPAIR EXPANSION	SUBDIVISION	LOT #
NEW C REPAIR EXPANSION	Site Improvements required prior to Construction Authorizati	on Issuance:
Type of Structure: 402 SFD W/ NEW Garage		
Proposed Wastewater System Type: 25% Reduction 575.		
Projected Daily Flow: 480 GPD		
Number of bedrooms: 4 Number of Occupants: 8	_max	
Basement 🖬 Hes 🗌 No		
Pump Required: 🛛 Yes 🗌 No 🖓 May be required based on final le	location and elevations of facilities	
Type of Water Supply: Community Public Well Distan		Five years
Permit conditions:		□ No expiration
		er of academic former and

08/83/2017 Authorized State Agent:: THS Date: _ SEE ATTACHED SITE SKETCH 1011 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 their requirements. This site is subject to revocation if the site plan, plat, or the intended use changes. The Improvement Permit shall not be affected by a change in ownership of the site. This permit is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit..

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. Systems shall be installed in accordance with the attached system layout.

ISSUED TO: Ray C. Stephenson -	TH PROPERTY LOCATION: 627	7 NC 55 W.
))	SUBDIVISION	LOT #
Facility Type: 4BA SFD of NEW Gorg	🚾 🗆 New 🖃 Expansion 🔲 Repair	
Basement? Ves 🗆 No Basement Fixt	ures? 🗌 Yes 🔄 No	
Type of Wastewater System**	duction System	(Initial) Wastewater Flow: <u>780</u> GPD
(See note below, if applicable 🗆)	/	
25% redu	ution System (Repair)	
Installation Requirements/Conditions	Number of trenches	
Septic Tank Size <u>1250</u> gallons	Exact length of each trench feet	Trench Spacing: Feet on Center
Pump Tank Size gallons	Trenches shall be installed on contour at a	Soil Cover: 12 inches
	Maximum Trench Depth of: inches	(Maximum soil cover shall not exceed
	(Trench bottoms shall be level to $+/-1/4$ "	36" above the trench bottom)
	in all directions)	
Pump Requirements:ft. TDH vs	_ GPM	inches below pipe
		Aggregate Depth: inches above pipe
Conditions:		12 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 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 no	t 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 cond	ditions of this permit. SEE ATTACHED SITE SKETCH		
Authorized State Agent: Construction Authorization Expiration			

