26101

HTE# 10-5-24378

Harnett County Department of Public Health

Improvement Permit

A buildin	g permit cannot be issued with o			
ISSUED TO: MICHAEL WADE GRISHO	PROPERTY LOCATIO	ON: DARROW	H RO	n
NEW REPAIR □ EXPANSION □				LOT # _ &
Type of Structure: SFO (60'X40')	3	are mibrovements red	uired prior to Construction Auth	orization issuance:
Proposed Wastewater System Type: Conversions	L			
Projected Daily Flow: 360 GPD				
Number of bedrooms: Number of Occupants:	<u> </u>	•		
Basement Tyes No	_			
Pump Required: □Yes ⚠ No □ May be required ba Type of Water Supply: □ Community ➤ Public □	sed on final location and elevatio	ons of facilities	B	—
Permit conditions:	veii Distance from wen 10	O reet	Permit valid for:	Five years
				☐ No expiration
Authorized State Agent:	PENS Date: 5	12510	SEE A	TTACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guarantees the site is subject to revocation if the site plan, plat, or the intended use changes.	issuance of other permits. The permit hol	older is responsible for chec	king with appropriate governing bodies	in meeting their requirements. This
the Laws and Rules for Sewage Treatment and Disposal and to conditions of this	permit	cted by a change in owner	ship of the site. This permit is subject i	to compliance with the provisions of
	Construction Auth	norization		
	(Required for Building			
The construction and installation requirements of Rules .1950, .1952, .1954, .199 with the attached system layout.	5, .1956, .1957, .1958. and .1959 are in	ncorporated by references i	nto this permit and shall be met. System	ms shall be installed in accordance
ISSUED TO: MICHAEL WADE GREY	PROPERTY LO	OCATION: Dag	eroca Ro	
	SUBDIVISION	JAMES	FARRAR	LOT # _
Facility Type: SFD(60'×40')		n 🗆 Repair		
Basement? Yes No Basement Fixtures?	☐ Yes ☒ No			.
Type of Wastewater System** Convention	<u> </u>		(Initial) Wastewater Flow:	: <u>360 </u>
(See note below, if applicable)	<u>>_ (</u> F	Repair)		
	per of trenches		_	
	length of each trench 30	o o feet	Trench Spacing:	_ Feet on Center
~	hes shall be installed on conto		Soil Cover:	inches
Maxi	num Trench Depth of:12	inches inches	(Maximum soil cover shall	not exceed
•	ch bottoms shall be level to H	+/-1/4"	36" above the trench bo	ttom)
	directions)		•	
Pump Requirements:ft. TDH vs GPM	L	7 <u>k</u>		inches below pipe
()	·		Aggregate Depth:	inches above pipe
Conditions: WATER LINE MUST BE 10	From SEPTIC DYST	TEN. NO U.	TILITIES	inches total
MAY ENCROACH ON REPAIR OF	- MITIAL ARGA	•	1,000	

**If applicable: I understand the system type specified is diff	rent from the type specified o	on the application.	l accept the specifications of	this permit.
Owner (Level Decree of Co.				
Owner/Legal Representative Signature:			Date:	
This Construction Authorization is subject to revocation if the she plan, plat, or the Construction Authorization is subject to compliance with the provisions of the Law.	intended use changes. The Construction	Authorization shall not be		
The same of the sa	and nuies for bewage freatment and Dis	sposar and to the condition	s or this permit. 3EE	ATTACHED SITE SKETCH
Authorized State Agents	200	.	challa	
Authorized State Agent: Who Who	P.C.H.S		5 25 10	
	Construction Authorizati	tion Expiration Da	te: 5 35 15	

HTE#	10-5	-24378	
111 1 11		9 1970	

Harnett County Department of Public Health Site Sketch

Authorized State Agent:

PROPERTY LOCATON: DARROCH PRO
SUBDIVISION TAMES FARRAR LOT # 2

Authorized State Agent: Darroch Pro
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