HTE# 11-5-26129 Harnett County Department of Public Health	
Improvement Permit	26422
A building permit cannot be issued with only an Improvement Permit	
PROPERTY LOCATION: 31735 Anotion CHUR	
	LOT #
NEW I REPAIR EXPANSION Site Improvements required prior to Construction Au Type of Structure:	Inorization Issuance:
Proposed Wastewater System Type: 25% REDUCTOR State	anna a tha a
Projected Daily Flow: 360 GPD	
Number of bedrooms: Number of Occupants:max Basement 🗆 Yes 🖾 No	
Pump Required: 🗆 Yes 🔲 No 🛛 May be required based on final location and elevations of facilities	/
Type of Water Supply: 🗆 Community 🗹 Public 🗆 Well Distance from well feet 🛛 Permit valid for:	/
Permit conditions:	No expiration
D TREATS	
Authorized State Agent: Jones & Manhant Date: 3-2-11 SEE	ATTACHED SITE SKETCH
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 bodi 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	es in meeting their requirements. This to compliance with the provisions of
the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.	to compliance with the provisions of
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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. Sys with the attached system layout.	tems shall be installed in accordance
ISSUED TO: Robert Jenkins PROPERTY LOCATION: JAN 1735 Antioch	Charle 21
ISSUED TO: <u>Robert Jenkins</u> PROPERTY LOCATION: <u>In 1735 Antioch</u>	INT #
Facility Type:SFD IN New I Expansion I Repair	
Basement? 🗆 Yes 🔲 No Basement Fixtures? 🖾 Yes 🖾 No	
Type of Wastewater System** <u>Z5% REDUGION</u> System (Initial) Wastewater Flo	w: <u>360</u> GPD
(See note below, if applicable [])	
Installation Requirements/Conditions Number of trenches 3	
Installation Requirements/Conditions Number of trenches 3 Septic Tank Size 1000 gallons Exact length of each trench 100 feet Trench Spacing: 2	Feet on Center
Pump Tank Size gallons Trenches shall be installed on contour at a Soil Cover:	inches
Maximum Trench Depth of: $20 \rightarrow jb$ inches (Maximum soil cover sha	
(Trench bottoms shall be level to $+/-1/4$ " 36" above the trench	
in all directions)	
Pump Requirements:ft. TDH vs GPM	nches below pipe
Conditions: Aggregate Depth:	<pre>inches below pipe inches above pipe / Z inches above total</pre>
	inclies 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: / understand the system type specified is different from the type specified on the application. I accept the specifications	of this manual
<u>— applicable</u> , and estand the system type specified is unrelent nom the type specified on the application. Tattept the specifications	or this permit.
Owner/Legal Representative Signature: Date:	
Owner/Legal Representative Signature: Date:	
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. SEE ATTACHED SITE SKETCH	
Authorized State Agent: Markon from Date: Date: Date: Date:	
Construction Authorization Date: 3 - 2 -	16

Permit # <u>26422</u> HTE# 11-5-26129 Harnett County Department of Public Health Site Sketch ISSUED TO: Robert JENKINS PROPERTY LOCATON: 3C1735 Antioch CHURCHARS Authorized State Agent: James & Manhon American Date: 3-Z-11 WET SOLLS UltrA 1100 100° -10 SFD 45 offi isell 50' 61' YO OUT TO SR 1735 Antioch CH RD PATL

EX Well