



Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

ICCIIED TO-				PROPERTY LO	CATION:		
ISSUED TO:R	EPAIR 🗆	FVDAN		SUBDIVISION			LOT #
		EXPAN	SION 🗆		Site Improvements	required prior to Construction Author	orization Issuance:
Type of Structure: Proposed Wastewater Syst	em Type:						Tobaciic.
Projected Daily Flow:	ст туре	CDD					
Number of bedrooms:		Mumber of Oc					
Basement Yes] No	Mulliper of Oct	upants:	max			
		May be re	minal Land	6 11			
Pump Required: ☐Yes Type of Water Supply: ☐ Permit conditions:	Community	Dublic	quired based (on final location and elev	rations of facilities		
Permit conditions:	- community	- Tubiic	□ Well	Distance from well	feet	Permit valid for:	☐ Five years☐ No expiration
Authorized State Agent::				D			
the issuance of fills helllif by fli	e neaith Debartme	of in no way miai	antone the income	fl	CONTRACTOR OF THE PARTY OF THE	SEE ATT	TACHED SITE SKETCH
site is subject to revocation if the the Laws and Rules for Sewage Tr	site plan, plat, or eatment and Dispo	the intended use sal and to conditi	changes. The Im ons of this permi	provement Permit shall not be it.	affected by a change in ow	hecking with appropriate governing bodies in nership of the site. This permit is subject to	n meeting their requirements. This compliance with the provisions of
			C	onstruction Au	thorization		
The construction and invalled				(Required for Build	ing Permit)		
with the attached system layout	equirements of Rule	es .1950, .1952, .	1954, .1955, .19	56, .1957, .1958. and .1959 a	re incorporated by reference	s into this permit and shall be met. Systems	shall be installed in accordance
C						7,200	shall be installed in accordance
ISSUED TO:	155062	1ED 6	SAY	PROPERTY	LOCATION, 125	BEZLA HOWING BEZL RIDGE	- 0
_				CIIDDINICIO	LOCATION.	QUINO DAING	son Do
Facility Type: Ext	. SFC	>		Now D Emand	IN TOWNE	DELL KIDGE	LOT # 103
	2000	Basement Fix		- Lypain	ion 🔀 Repair		
Type of Wastewater System				344.5			
(See note below, if applica						(Initial) Wastewater Flow: _	480 GPD
тррисс	2	5% R	60000	10W SYSTEM	P800 2010		
nstallation Requirements/0	Conditions	0,01	COVC	10M 3 4210W	(Repair)		
Septic Tank Size Exis	Z w C			f trenches _ 3			
Dump Tank Size	gallo	ns	Exact leng	th of each trench	feet feet	Trench Spacing: 9	Feet on Center
Sump Tank Size	gallor	15	Trenches s	hall be installed on co	ntour at a	6 10	ches
			Maximum	Trench Depth of: 18	· LZ inches	(Maximum soil cover shall no	
			(Trench bo	ttoms shall be level to	+/-1/4"	36" above the trench better	ot exceed
			in all direc			36" above the trench botto	m)
ump Requirements:	ft. TD	H vs.	GPM)			
		\$0 (2003)77/b					inches below pipe
onditions:						Aggregate Depth:	inches above pipe
							inches total
ATED LINES /INCLUDIN	C IDDICATIO						
ATER LINES (INCLUDIN	G IKKIGAIIC	IN) MUST B	E 10FT. FR(DM ANY PART OF SEI	PTIC SYSTEM OR R	EPAIR ARFA	
O UTILITIES ALLOWED I	N INITIAL O	R REPAIR DI	RAIN FIELD	AREA.			
	the system ty	rpe specilieu	is airrerent i	from the type specified	on the application.	I accept the specifications of this	s permit.
wner/Legal Representative							/
Construction Authorization is such	orginature:					Date:	
struction Authorization is subject to	cc to revocation if	the site plan, pla	it, or the intende	d use changes. The Construction	n Authorization shall not be		ership of the site. This
struction Authorization is subject to	compresses with	THE PROVISIONS OF	ne Laws and Rul	es for Sewage Treatment and D	isposal and to the condition		TACHED SITE SKETCH
the minute of the state of the	M	11/1	1			1 1	
thorized State Agent: _	1111	1 21	1	DEX15	Date:	4/10/17,	1
			C	onstruction Authoriza	tion Expiration Da	10. 10/02	-
	-			, activite	won expiration Da	16. 1111 00	

HTE#	REPAIR	
HTE#	KERAIL	

Permit # 2944)

Harnett County Department of Public Health Site Sketch

ISSUED TO: CHIRISS OPHER GRAY	PROPERTY LOCATON: 125 BEZZA HOMINGTON Da.
BULL 10.	SUBDIVISION MAMIE BELL ROGE LOT # 103
Authorized State Agent:	Date:

