Harnett County Department of Public Health

Improvement Permit

27315

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: Will Lucas Rd. ISSUED TO: Atlantic Contruction Subdivision Sweet water Site Improvements required prior to Construction Authorization Issuance: Type of Structure: SFD 39 X4 Proposed Wastewater System Type: 25 % Reduction System Number of Occupants: ___ C Number of bedrooms: 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: Five years Permit conditions: ☐ No expiration Authorized State Agent: Sugar Marin Kell) _____ Date: 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: Atlantic Construction PROPERTY LOCATION: Will Luces Rd.
SUBDIVISION Sweetwater ☐ Expansion ☐ Repair Basement? Yes No Basement Fixtures?

Yes Type of Wastewater System** 25 % Reduction System (Initial) Wastewater Flow: 760 GPD (See note below, if applicable \square) Number of trenches 2 Installation Requirements/Conditions Exact length of each trench _______ feet Trench Spacing: ______ Feet on Center Septic Tank Size /OOO gallons Soil Cover: 18.24 inches Pump Tank Size gallons Trenches shall be installed on contour at a Maximum Trench Depth of: 30-76 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 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: This Construction Authorization is subject to revocation if the site plan, plat, or the intended use changes. The Construction Authorization shall not 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 conditions of this permit. SEE ATTACHED SITE SKETCH Authorized State Agent: Drya prolosin, REHS

Construction Authorization Expiration Date: 3/14/2018

Harnett County Department of Public Health Site Sketch

	PROPERTY LOCATON: Will Lucas Rd.		
ISSUED TO: Atlantic Construction	SUBDIVISION Jue et water	LOT #	68
1	1./		
Authorized State Agent: Lynn Mc Noing REA	45 Date: 3/14/2013		

