HTE# 16-5-329296

Harnett County Department of Public Health

28915

Improvement Permit

A building permit cannot be issued with only an Improvement Permit	
SSUED TO: McKee Homes LLC PROPERTY LOCATION: Docs Ro LOT # 15	9
SUBDIVISION OAKOOT LOT # 15 NEW X REPAIR DEXPANSION DE	
Type of Structure: 550537517	
Proposed Wastewater System Type: 25%. REDUCTION SYSTEM	
Projected Daily Flow: 450 GPD ———————————————————————————————————	
Number of bedrooms: Number of Occupants:max Basement	
Pump Required: No May be required based on final location and elevations of facilities	-
Type of Water Supply: Community Public Well Distance from well 100 feet Permit valid for: Five years No expiration	
Authorized State Agent: SEE ATTACHED SITE SKETCH	
Authorized State Agent:: 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. 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 provision the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.	This ns of
Construction Authorization	
(Required for Building Permit)	
(Negarieu 101 Dahating Fermits) 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.	nce
with the attached system layout.	
ISSUED TO: McKee Homes LC PROPERTY LOCATION: Docs RD	
	1_
Facility Type: SED (53×51) New 🗆 Expansion 🗆 Repair	
Basement? Yes No Basement Fixtures? Yes No	
Basement? ☐ Yes K No Basement Fixtures? ☐ Yes X No Type of Wastewater System** 25% REDUCTION SYSTEM (Initial) Wastewater Flow: ☐ GPI)
(See note below, if applicable)	
Pump Tank Size gallons	
The second secon	
in all directions)	nina
Pump Requirements:ft. TDH vs GPMinches below	
Aggregate Depth: inches above	9.000
Conditions: inches	totai
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	
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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.	LH
Authorized State Agent: Date: 71116	
Construction Authorization Expiration Date: 7 10 2	

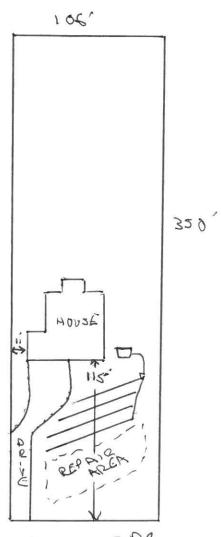
Harnett County Department of Public Health Site Sketch

Authorized State Agent:

PROPERTY LOCATON: DOCS RS

SUBDIVISION DESCRIPTION DES LOT # 159

Date: 7/11/16



EXECUTIVE DR