HTE# 16-5-399.55 Harnett County Department of Public Health 29091		
Improvement Permit		
A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: D_1440 Tomes Norwas real PROPERTY LOCATION: D_1440 Tomes Norwas real NEW REPAIR REPAIR EXPANSION SUBDIVISION FINATS Check Proposed Wastewater System Type: 25 25 Reck Projected Daily Flow: 420 GPD Number of bedrooms: 4 Number of Occupants: 8 max Basement Pres No Pump Required: Pres No Pump Required: Pres No Pump Required: Pres No Pump Required: Public Well Distance from well feet Permit valid for: Five years Permit conditions: No expiration		
Authorized State Agent::		
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: Little Grey LL PROPERTY LOCATION: Differences into this permit and shall be met. Systems shall be installed in accordance with the attached system layout. ISSUED TO: Little Grey LL PROPERTY LOCATION: Differences into this permit and shall be met. Systems shall be installed in accordance with the attached system layout. SUBDIVISION PROPERTY LOCATION: Differences into this permit and shall be met. Systems shall be installed in accordance with the attached system layout. Facility Type:		
(See note below, if applicable □) PPBS Reference (Repair) Installation Requirements/Conditions Septic Tank Size gallons Pump Tank Size ga		
Pump Requirements: ft. TDH vs GPM inches below pipe Conditions:		
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 permit. Owner/Legal Representative Signature: Date:		
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.		
Authorized State Agent: Date: Date: Date: Date:		

HTE# 16-5-39985	Permit # 2709/
Harnett County De	partment of Public Health
•	ite Sketch
ISSUED TO: LIHIE GREY LLC S	RTY LOCATON & 1440 James Norkin RD UBDIVISION KINNES CReak LOT # 41
Authorized State Agent: Janes & Manha,	Date: 08NOUZO16
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