HTE# 17-5-40734

## Harnett County Department of Public Health

Improvement Permit

5,	PROPERTY LOCATION: 1265 CRIFFIN RD
ISSUED TO: PAUL LYON	SUBDIVISION LOT # 2
NEW REPAIR THE EXPANSION TO	Site Improvements required prior to Construction Authorization Issuance:
Type of Structure: SEO (60 ~50)	the improvements required prior to construction Authorization issuance.
Proposed Wastewater System Type: 25% REDUCTION SYS	
Projected Daily Flow: 480 GPD	
Number of bedrooms: 4 Number of Occupants: 8	_max
Basement Yes No	
Pump Required: ☐Yes ☐No ☐May be required based on final	
Type of Water Supply:   Community Public   Well Distal	nce from well feet Permit valid for: Five years
Permit conditions:	No expiration
Authorized State Agent:	D. DIWIN
0	Date: SEE ATTACHED SITE SKETCH er 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 the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.	Permit shall not be affected by a change in ownership of the site. This permit is subject to compliance with the provisions of
Constr	ruction Authorization
(Re:	quired for Building Permit)
The construction and installation requirements of Rules :1950, :1952, :1954, :1955, :1956, :1957 with the attached system layout.	, .1958. and .1959 are incorporated by references into this permit and shall be met. Systems shall be installed in accordance
ISSUED TO: PAULLYON	PROPERTY LOCATION: 1265 GRIFFIN RD  SUBDIVISION LOT # 2
Facility Type: SED (60'~50') New	SUBDIVISIONLOT # 2
Pacility Type: SCO (60 1/3 0) New	L Expansion L Repair
Basement?  Yes  No Basement Fixtures?  Yes	≥ No
	System (Initial) Wastewater Flow: 480 GPD
(See note below, if applicable ) Pume To 25% RE	C
Installation Requirements/Conditions Number of trend	
	each trench 350 feet Trench Spacing:
,	e installed on contour at a Soil Cover: 6-28 inches
	Depth of: 18-30 inches (Maximum soil cover shall not exceed
,	shall be level to $\pm \frac{1}{4}$ " 36" above the trench bottom)
in all directions)	
Pump Requirements:ft. TDH vs GPM	inches below pipe
	Aggregate Depth: inches above pipe
Conditions:	inches total
WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM A	NY PART OF SEPTIC SYSTEM OR REPAIR AREA.
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD ARE	
** 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:	Date:
	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
The state of the s	1 ]
Authorized State Agent: RC-1.	Date: 2/20,17,
Tanat	Date: 2) 3 17  ruction Authorization Expiration Date: 2 2 2

## Harnett County Department of Public Health Site Sketch

ISSUED TO:  PROPERTY LOCATON: 12-  SUBDIVISION  Authorized State Agent:  PROPERTY LOCATON: 12-  SUBDIVISION  ON TON TON TON TON TON TON TON TON TON T	65 GRIPE IN RD  010) Date: 2)28/17	_ LOT # _ <del>- </del>
ESESO  140128  EQ. 140128  EQ. 140128	REPARACEA	