HTE# 17-5-410052 Harnett County Department of Public Health

29465

Improvement Permit

A building permit cannot be issued with	h only an Improvement Permit S2 TION: Corr West Or. (Baileys (1551
PROPERTY LOCAT	MON: Curr Well Dr. (Baileys 1	Crossrouds Rd
ISSUED TO: CONST. CO. SUBDIVISION	Willowbrock	LOT # ()
	Site Improvements required prior to Construction Authoriz	ation Issuance:
Type of Structure: 3B12 SFD (GO'XSI')		
Proposed Wastewater System Type: 25% ned. 5yst.		
Projected Daily Flow: 366 GPD		
Number of bedrooms: <u>3</u> Number of Occupants: <u>6</u> max		
Basement 🗆 Yes 🖃 No		
Pump Required: 🗆 Yes 🗆 No 🛛 🖬 May be required based on final location and eleval	tions of facilities	/
Type of Water Supply: 🗆 Community 🛛 Public 🗆 Well Distance from well	feet Permit valid for:	The years
Permit conditions:		\square No expiration

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: Castlon const. Com	property LOCATION: Cur	Well Dr. (Bailey Crossroads Rd.)
	SUBDIVISION Will	OWBROOK LOT #
Facility Type: 3BR SIED (GO'XGI')	_ 🛛 New 🗆 Expansion 🗆 Repair	
Basement? 🗆 Yes 😱 No 🛛 Basement Fixtu		
Type of Wastewater System** Z5%	Reduction 575tem	(Initial) Wastewater Flow: <u>366</u> GPD
(See note below, if applicable)		and a construction of the
Pump to ZS	To Red. 575tcm (Repair)	
Installation Requirements/Conditions	Number of trenches	
Septic Tank Size <u>1000</u> gallons	Exact length of each trench feet	Trench Spacing: Feet on Center
Pump Tank Size gallons	Trenches shall be installed on contour at a	Soil Cover: 🖉 inches
	Maximum Trench Depth of: 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	G inches below pipe
		Aggregate Depth: inches above pipe
Conditions:		(Z 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:	Date:
This Construction Authorization is subject to revocation if the site plan, plat, or the intended use changes. The Construction Authorization	tion 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: Construction Authorization Ex	Date: 04/25/2017 piration Date: 04/25/2022

