HTE# 17-5-411652 Harnett County Department of Public Health

Improvement Permit

PROPERTY LOCATION: Schoole La (NE - 210 M.)	
1.1	Johnson Ferm S/D LOT # 47
NEW REPAIR EXPANSION	Site Improvements required prior to Construction Authorization Issuance:
Type of Structure: 3BC SFS (40'X 36')	
Proposed Wastewater System Type: 25% Neducaion 575	
Projected Daily Flow: 48-360 GPD	
Number of bedrooms: Number of Occupants: max	
Basement Yes No	
Pump Required: Tyes No May be required based on final location and eleva	tions of facilities
Type of Water Supply: Community Public Well Distance from well	
Permit conditions:	□ No expiration
Authorized State Agent: Date:	05/23/17 SEE ATTACHED SITE SKETCH
Authorized State Agent: Date: The issuance of this permit by the Health Department in no way guarantees the issuance of other permits. The permit	
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 Au	thorization
(Required for Build	ing Permit)
The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .1957, .1958. and .1959 at	
with the attached system layout.	
ISSUED TO: Gary Robinson Homes PROPERTY SUBDIVISION	LOCATION: Saddle Lo. (NC ZION)
SUBDIVISI	ON Johnson Form 5/0 LOT # 47
Facility Type: 932 SED (40'x36') - New - Expans	
Basement? ☐ Yes ☐ No Basement Fixtures? ☐ Yes ☐ No	
	(Initial) Wastewater Flow: 486 GPD
	(Illinai) Wastewater Flow Of D
(See note below, if applicable □)	(Di-)
Pump to 25% red. System	
Installation Requirements/Conditions Number of trenches	
Septic Tank Size 1000 gallons Exact length of each trench	
Pump Tank Size gallons Trenches shall be installed on c	
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	inches below pipe
	Aggregate Depth: inches above pipe
Conditions:	
WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM ANY PART OF S	EPTIC 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	ed on the application. I accept the specifications of this permit.
Owner/Legal Representative Signature:	Date:
Owner/Legal Representative Signature: This Construction Authorization is subject to revocation if the site plan, plat, or the intended use changes. The Constru	oction 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.	
160	
Authorized State Agent:	
Authorized State Agent: Date: 05/23/17 Construction Authorization Expiration Date: 05/23/22	

Permit # _____ 29485

Harnett County Department of Public Health Site Sketch

Authorized State Agent:

PROPERTY LOCATON: Saddle LO (NC-ZION)

SUBDIVISION Johnson Form 5/D LOT # 47

