

HTE# 17-5-41774

Harnett County Department of Public Health

29609

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

ISSUED TO: Turner Matthews
PROPERTY LOCATION: Hwy 421
SUBDIVISION:
LOT #:
Type of Structure: SFD
Proposed Wastewater System Type: 25% Reduction
Projected Daily Flow: 240 GPD
Number of bedrooms: 2 Number of Occupants: 4 max
Basement: No
Pump Required: Yes
Type of Water Supply: Public
Permit valid for: Five years

Authorized State Agent: James E. Markham
Date: 7-31-17
SEE ATTACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guarantees the issuance of other permits.

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.

ISSUED TO: Turner Matthews
PROPERTY LOCATION: Hwy 421
SUBDIVISION:
LOT #:
Facility Type: SFD
Basement: No
Type of Wastewater System: 25% Reduction System
(Initial) Wastewater Flow: 240 GPD
Installation Requirements/Conditions:
Septic Tank Size: 1500 gallons
Pump Tank Size: 1000 gallons
Number of trenches: 3
Exact length of each trench: 80 feet
Trench Spacing: 9 feet on center
Soil Cover: 6 inches
Aggregate Depth: 12 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 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: James E. Markham
Date: 7-31-17
Construction Authorization Expiration Date: 7-31-22

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Harnett County Department of Public Health Site Sketch

ISSUED TO: Turner Matthews PROPERTY LOCATOR: Hwy 421
SUBDIVISION _____ LOT # _____

Authorized State Agent: James E. Matheson Date: 7-31-17

