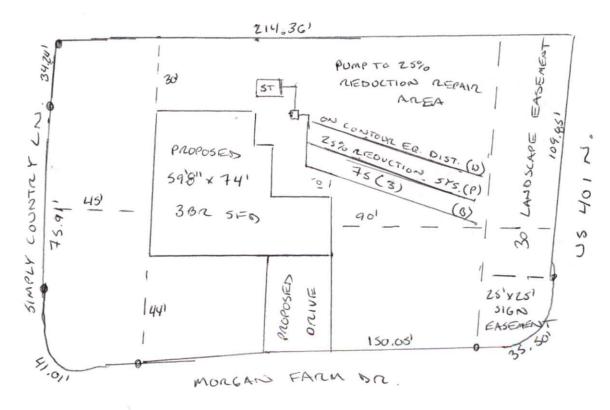
HTE# 17-5-41814 Harnett County Department of Public Health

Improvement Permit

A building	permit cannot be issued w	rith only an Improvement	Permit	
/1	PROPERTY LOC	CATION: 18 Simpl	y Country Ln. (U	LOT # 29
ISSUED TO: Stephenson Blds Inc.	SUBDIVISION			
NEW ☑ REPAIR ☐ EXPANSION ☐		Site Improvements req	uired prior to Construction Aut	horization Issuance:
Type of Structure: 302 (59'8" x 74") SF3				
Proposed Wastewater System Type: 25% reduction	575,			
Projected Daily Flow: 366 GPD	(
Number of bedrooms: Number of Occupants:	max			
Pump Required: Tes No May be required based	d on final location and als	vations of facilities		
Type of Water Supply: Community Public We Permit conditions:			Permit valid for:	☐ Five years ☐ No expiration
Authorized State Agent::		011-1-1-	777	ATTACHED SITE SKETCH
Authorized State Agent:: The issuance of this permit by the Health Department in no way guarantees the is site is subject to revocation if the site plan, plat, or the intended use changes. The the Laws and Rules for Sewage Treatment and Disposal and to conditions of this p	suance of other permits. The permits and be lmprovement Permit shall not be	mit holder is responsible for che	cking with appropriate governing bodie	s in meeting their requirements. This
	Construction A	uthorization		
The construction and installation requirements of Rules .1950, .1952, .1954, .1955,	(Required for Bui		into this permit and shall he met Sys	tems shall be installed in accordance
with the attached system layout.		are mediporated by references	into this perint and shall be need sp	and the instance in accordance
ISSUED TO: Stephenson Blds Inc.	PROPER SUBDIVI	TY LOCATION: 18	Simply Country La	LOT # 29
Facility Type: 3BR (59'8"×74") 5 FD	New □ Expa	nsion Repair		
Basement? Yes No Basement Fixtures? Type of Wastewater System** 25% (reach)	ion Syste	M	(Initial) Wastewater Flo	w: 360 GPD
(See note below, if applicable)				
Pump to 75%	Red. 575.	(Repair)		
Installation Requirements/Conditions Numb	er of trenches 3			
	length of each trench _		Trench Spacing:9	Feet on Center
	nes shall be installed on		Soil Cover: /Z	
	num Trench Depth of: _	and the second of the second o	(Maximum soil cover sha	
	th bottoms shall be level		36" above the trench	
,	directions)			
Pump Requirements:ft. TDH vs GPM	uncctions			6 inches below pipe
rump nequirements.			Aggregate Depth:	inches above pipe
Conditions:			00 0	/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 F				
		ifed on the application	I assess the anniforming	of this name
**If applicable: / understand the system type specified is diffe	rent from the type spec	rified on the application	. I accept the specifications	of this permit.
vner/Legal Representative Signature:				
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 condit	ions of this permit.	SEE ATTACHED SITE SKETCH
Authorized State Agent: Elmer Elmer Date: 07/27/2017				
Construction Authorization Expiration Date: 07/27/2022				

Harnett County Department of Public Health Site Sketch

Authorized State Agent: Agent:



*System Flagged by Adams Soil Consulting

- (w) white
- (P) Pink
- (0) Blue

* All Additional are Serial Dist. Repair Area