

**Improvement Permit**

A building permit cannot be issued with only an Improvement Permit

ISSUED TO: PHILIP DAVID WEBB PROPERTY LOCATION: NC21050505H

NEW  REPAIR  EXPANSION  SUBDIVISION \_\_\_\_\_ LOT # \_\_\_\_\_

Type of Structure: SFD (58'x44') Site Improvements required prior to Construction Authorization Issuance: \_\_\_\_\_

Proposed Wastewater System Type: 25% REDUCTION SYSTEM

Projected Daily Flow: 360 GPD

Number of bedrooms: 3 Number of Occupants: 6 max

Basement  Yes  No

Pump Required:  Yes  No  May be required based on final location and elevations of facilities

Type of Water Supply:  Community  Public  Well Distance from well 100 feet

Permit conditions: \_\_\_\_\_ Permit valid for:  Five years  No expiration

Authorized State Agent: ~~PHILIP DAVID WEBB~~ REIS Date: 12/14/17 SEE ATTACHED SITE SKETCH

The issuance of this permit by the Health Department in no way guarantees the issuance of other 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 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 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: PHILIP DAVID WEBB PROPERTY LOCATION: NC21050505H

Facility Type: SFD (58'x44')  New  Expansion  Repair

Basement?  Yes  No Basement Fixtures?  Yes  No

Type of Wastewater System\*\* 25% REDUCTION SYSTEM (Initial) Wastewater Flow: 360 GPD

(See note below, if applicable  25% RED. SYS. (Repair)

**Installation Requirements/Conditions**

Septic Tank Size 1000 gallons Number of trenches 4

Pump Tank Size \_\_\_\_\_ gallons Exact length of each trench 75 feet Trench Spacing: 9 Feet on Center

Trenches shall be installed on contour at a Maximum Trench Depth of: 18 inches Soil Cover: 6 inches (Maximum soil cover shall not exceed 36" above the trench bottom)

Pump Requirements: \_\_\_\_\_ ft. TDH vs. \_\_\_\_\_ GPM Aggregate Depth: \_\_\_\_\_ inches below pipe \_\_\_\_\_ inches above pipe \_\_\_\_\_ inches total

Conditions: SEE SITE SKETCH FOR ALL CONDITIONS

**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: ~~PHILIP DAVID WEBB~~ REIS Date: 12/14/17

Construction Authorization Expiration Date: 12/14/22

HTE# 17-5-42823

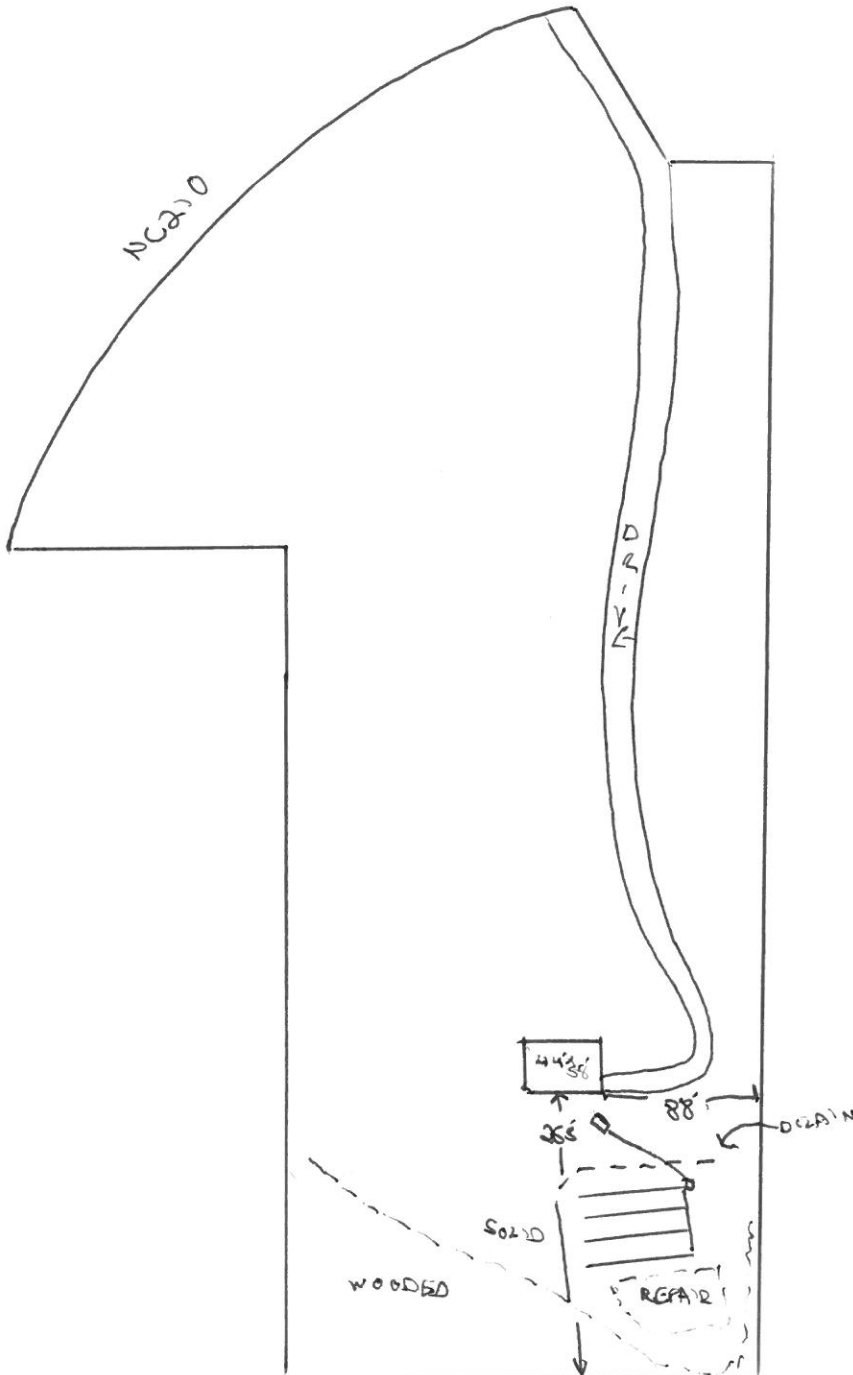
Permit # 29813

# Harnett County Department of Public Health Site Sketch

PROPERTY LOCATION: NC210 SOUTH

ISSUED TO: PITZER DAVID W888 SUBDIVISION \_\_\_\_\_ LOT # \_\_\_\_\_

Authorized State Agent: ~~REDACTED~~ (621) 62 TOLKSDORF Date: 12/14/17



- \* DRAIN FIELD IS FLAGGED  
DO NOT ATTEMPT TO  
INSTALL IF FLAGS ARE  
GONE
- \* FRENCH DRAIN REQUIRED  
3' DEEP  
100' LONG
- \* CALL WITH ANY QUESTIONS  
PRIOR TO INSTALLATION