

HTE# 18-5-43093

Harnett County Department of Public Health

29858

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

ISSUED TO: Jeremy M. Strickland

PROPERTY LOCATION: Mann Road (sn 1853)
SUBDIVISION _____ LOT # _____

NEW REPAIR EXPANSION

Site Improvements required prior to Construction Authorization Issuance: _____

Type of Structure: 302 56'x57' SFD

Proposed Wastewater System Type: 25% Reduction Sys.

Projected Daily Flow: 366 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 _____ feet

Permit valid for: Five years
 No expiration

Authorized State Agent: [Signature]

Date: 01/26/2018

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: Jeremy M. Strickland

PROPERTY LOCATION: Mann Road (sn 1853)
SUBDIVISION _____ LOT # _____

Facility Type: 302 56'x57' SFD New Expansion Repair

Basement? Yes No Basement Fixtures? Yes No

Type of Wastewater System** 25% Reduction Sys. (Initial) Wastewater Flow: 366 GPD
(See note below, if applicable)

25% reduction Sys. (Repair)

Installation Requirements/Conditions

Septic Tank Size 1000 gallons
Pump Tank Size _____ gallons

Number of trenches 3
Exact length of each trench 100 feet
Trenches shall be installed on contour at a
Maximum Trench Depth of: 24 inches
(Trench bottoms shall be level to +1/4"
in all directions)

Trench Spacing: 9 Feet on Center
Soil Cover: 12 inches
(Maximum soil cover shall not exceed
36" above the trench bottom)

Pump Requirements: _____ ft. TDH vs. _____ GPM

Aggregate Depth: NA inches below pipe
NA inches above pipe
NA inches total

Conditions: D-Box Equal Distribution Required

**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: [Signature] Date: 01/26/2018
ANDREW WARD Construction Authorization Expiration Date: 01/26/2023

HTE# 18-5-43093

Permit # 24858

Harnett County Department of Public Health Site Sketch

ISSUED TO: Jeremy Strickland

PROPERTY LOCATOR: Maun Road (SR 1853)

SUBDIVISION _____ LOT # 1

Authorized State Agent: _____

Andrew Curran, NCS
ANDREW CURRAN

Date: 01/26/2018

*D-Box Equal Distribution Required



