HTE# 18-5-4333 Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only an Improvement Permit	.)
SSUED TO: Comfort Homes Inco SUBDIVISION Exford Woods LOT # 23	2
REPAIR EXPANSION Site Improvements required prior to Construction Authorization Issuance:	,
type of Structure: 382 54 × 54 51=5	
Proposed Wastewater System Type: 26% reduction 5,5.	
Projected Daily Flow: 366 GPD	_
Number of bedrooms: Number of Occupants: 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 Community No expiration	
Authorized State Agent::	s of
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	e
with the attached system layout.	_
SSUED TO: Confort Homes Inc. PROPERTY LOCATION: Old Stage Rd. N. (Sa 100 SUBDIVISION Gx ford woods LOT # 23	20 3
Facility Type: 382 54'×64' 5FD New Expansion Repair	
Basement? Yes No Basement Fixtures? Yes No	
Type of Wastewater System** 25% Nedworks System (Initial) Wastewater Flow: 360 GPD	
(See note below, if applicable □)	
25% reduction 500 (Repair)	
Installation Requirements/Conditions Number of trenches 3	
Septic Tank Size 1000 gallons Exact length of each trench 75 feet Trench Spacing: 9 Feet on Center	
Pump Tank Size gallons	
Maximum Trench Depth of: QO inches (Maximum soil cover shall not exceed	
(Trench bottoms shall be level to +/-1/4" 36" above the trench bottom)	
in all directions)	
A 2 1 1 2 1	ne
Pump Requirements:ft. TDH vs GPMAggregate Depth: inches above p	
A III	•
Conditions: inches to	tai
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.	1
Authorized State Agent:	
CONSTRUCTION AUTHORIZATION EXDIFATION DATE. VS (O) L-2034	

Harnett County Department of Public Health Site Sketch

