## Harnett County Department of Public Health

## Improvement Permit

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: 3690 BAILEY XNDS NO (SN 1581) NANDY STEPHENSON RANDY STEPHENSONS LOT # 1 SUBDIVISION Site Improvements required prior to Construction Authorization Issuance: REPAIR 🔀 EXPANSION 🗍 NEW 🔲 Type of Structure: \_ FXT 301 Proposed Wastewater System Type: \_\_\_\_\_ CONO. STOTEM Projected Daily Flow: 360 GPD Number of bedrooms: Number of Occupants: \_\_\_\_ Basement Yes ☐ No May be required based on final location and elevations of facilities Pump Required: Yes Type of Water Supply: Community Public Well Distance from well A feet Permit valid for: Five years No expiration SEE ATTACHED SITE SKETCH Authorized State Agent:: 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. PROPERTY LOCATION: 3690 BAILEY XNDS 2D (SN 1581) MAROIDY STEPHENSON RAMDY STEPHENSON Expansion Repair EXT 3BL SID No No Basement Fixtures? Yes Basement? Yes EXT CONVENTIONAL STS. (Initial) Wastewater Flow: 3CC GPD Type of Wastewater System\*\* (See note below, if applicable ) CONSUENTIONAL STS - (Repair) Number of trenches \_\_\_\_3 Installation Requirements/Conditions Exact length of each trench 133 Septic Tank Size Ext gallons Trenches shall be installed on contour at a Soil Cover: Pump Tank Size 1000 gallons Maximum Trench Depth of: \_\_\_\_26 \_\_\_inches (Maximum soil cover shall not exceed (IF RECOUNTED) (Trench bottoms shall be level to +/-1/4" 36" above the trench bottom) in all directions) inches below pipe Pump Requirements: ft. TDH vs. \_\_ \_\_inches above pipe 12 inches total DEE SITE 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: 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: \_\_\_ Construction Authorization Expiration Date: 11/25/2025 ANDREW

## Harnett County Department of Public Health Site Sketch

Property Location:	3690 BALLEY XA				
ssued To:	oy sterhenson	Subdivision	MANDY	STEPHENSON	Lot #/_
Authorized State Ag	gent:	Wie Land		Date:	11/25/2020
		ANDREW CO	nin		
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This drawing is for	illustrative purposes only	. System installation	n must meet a	ll pertinent laws, rule	es, and regulations.
7	BAILET'S	VANS	20/4		