Harnett County Department of Public Health

	the state of the s	me meanth	10
	Improvement Permit		7-1-87
	A building permit cannot be issued with only an Improvement	nt Permit	operati
1000000	PROPERTY LOCATION: Au 21	R	- Sein
ISSUED TO: Traves long	SUBDIVISION DUNCTU	ant	LOT # 5
NEW REPAIR FOR EXPA	NSION Site Improvements re	equired prior to Construction Authoriz	ation Issuance:
Proposed Wastewater System Type: Tank	Dr.)(a		
Projected Daily Flow: 360 GPD	7709		
	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 Publi	ic Well Distance from well feet	Permit valid for:	Five years
Permit conditions:			☐ No expiration
Authorized State Agents 2 MA	what I Date: 3-3-20	SEE ATTAC	CHED SITE SKETCH
The issuance of this permit by the Health Department in no way s	guarantees the issuance of other permits. The permit holder is responsible for ch	serking with annionriate governing hodies in m	neeting 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 own	iership of the site. This permit is subject to co	impliance with the provisions of
the Laws and Rules for Sewage Treatment and Disposal and to con	ditions of this permit.		
	Construction Authorization		
	Construction Authorization		
The construction and installation requirements of Pulse 1900, 190	(Required for Building Permit)		
with the attached system layout.	2, .1954, .1955, .1956, .1957, .1958, and .1959 are incorporated by references	into this permit and shall be met. Systems sh	iall be installed in accordance
ISSUED TO: TRAVES long	PROPERTY LOCATION: Hw	4210	
	SUBDIVISION NORTH	DET	LOT # _5
Facility Type: EX SFD	New _ Expansion 🗹 Repair		
Basement? Yes No Basement	Fixtures? Yes No		
Type of Wastewater System**		(Initial) Wastewater Flow:	360 GPD
(See note below, if applicable ()	le 10.1/2.		
TANK STATE OF THE	K ON LY (Repair)		
Installation Requirements/Conditions	Number of trenches		
Septic Tank Size 1600 gallons	Exact length of each trenchfeet	Trench Spacing: F	eet on Center
Pump Tank Sizegallons	Trenches shall be installed on contour at a	Soil Cover:inc	
	Maximum Trench Depth of:inches	(Maximum soil cover shall not	exceed
	(Trench bottoms shall be level to +/-1/4"	36" above the trench bottom	n)
	in all directions)		
Pump Requirements:ft. TDH vs	GPM		inches below pipe
		Aggregate Depth:	inches above pipe
Conditions:			inches total
WATER LINES (INCLUDING IRRIGATION) MUS	T BE 10FT. FROM ANY PART OF SEPTIC SYSTEM OR F	REPAIR AREA.	
NO UTILITIES ALLOWED IN INITIAL OR REPAII	RAIN FIELD AREA.		
**If applicable: / understand the system type specif	fied is different from the type specified on the application.	I accent the energifications of this	c parmit
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	to is omercia nom the type specified on the application.	r accept the specifications of this	perim.
Owner/Legal Representative Signature:		Date:	
This Construction Authorization is subject to revocation if the site pla	an, plat, or the intended use changes. The Construction Authorization shall not b	be transferred when there is a change in owner	ership of the site. This
Construction Authorization is subject to compliance with the provision	ns of the Laws and Rules for Sewage Treatment and Disposal and to the condition	ons of this permit. SEE AT	TACHED SITE SKETCH
	c 11 10 70 00		
Authorized State Agent:	Market Date:	3-3-70	
	Construction Authorization Expiration D	ate: 3 3 - 25	

HTE#	Permit # 11714 Reference to
	Harnett County Department of Public Health 1997 mit
	Site Sketch
	DRODERTY LOCATION // 7.3

