Harnett County Department of Public Health

Improvement Permit

A	building permit cannot be issued with only an Improvement	
ISSUED TO: William Robert Bax	PROPERTY LOCATION: 102 MC	ses trip Lo. (Ashe Ave.)
NEW REPAIR EXPANSIO		
Type of Structure: Ext. SED + E.	enension	quired prior to Construction Authorization Issuance:
Proposed Wastewater System Type: 25% Ne	duction 55	
Projected Daily Flow GPD		
Number of bedrooms: 3 Number of Occup Basement Yes No	oants:Gmax	
Pump Required: Yes No May be requ	ired based on final location and elevations of facilities	
Type of Water Supply: Community Public Permit conditions:	Well Distance from well feet	Permit valid for: Eive years No expiration
	>	
Authorized State Agent::	Date: 03/17/	2020 SEE ATTACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guara	ntees the issuance of other permits. The permit holder is responsible for che changes. The Improvement Permit shall not be affected by a change in owne	ecking with appropriate governing bodies in meeting their requirements. This ership of the site. This permit is subject to compliance with the provisions of
	Construction Authorization	
	(Required for Building Permit)	
The construction and installation requirements of Rules .1950, .1952, .1 with the attached system layout.	954, .1955, .1956, .1957, .1958, and .1959 are incorporated by references	
		521725
155UED TO: William Robert Baref		MOSS Tripp Ln. (Ashe Ave.)
Facility Types 77 1	SUBDIVISION Terry New Expansion Repair	L 71.99 LOT # 1
Facility Type: Fact STO - New Expansion Repair Basement? Yes No Basement Fixtures? Yes No		
The second secon		(Initial) Wastewater Flow: 360 GPD
(See note below, if applicable)	To reduction yster	(Illitial) Wastewater Flow. See Grb
	eduction 35 · (Repair)	
Installation Requirements/Conditions	Number of trenches 3 (Repair)	
Septic Tank Size Loco gallons	Exact length of each trench	Trench Spacing: Feet on Center
Pump Tank Sizegallons	Trenches shall be installed on contour at a	Soil Cover: /a inches
	Maximum Trench Depth of: 24 inches	(Maximum soil cover shall not exceed
	(Trench bottoms shall be level to +/-1/4"	36" above the trench bottom)
	in all directions)	Section (Section) displaced for individual Section (Section)
Pump Requirements:ft. TDH vs	GPM	inches below pipe
		Aggregate Depth: NA inches above pipe
Conditions:		inches total
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: 1 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:
	lat, or the intended use changes. The Construction Authorization shall not b	e 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		
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Authorized State Agent: Date: 03/17/2026		
ANDREW CORR Construction Authorization Expiration Date: 03/17/2025		

Harnett County Department of Public Health Site Sketch

