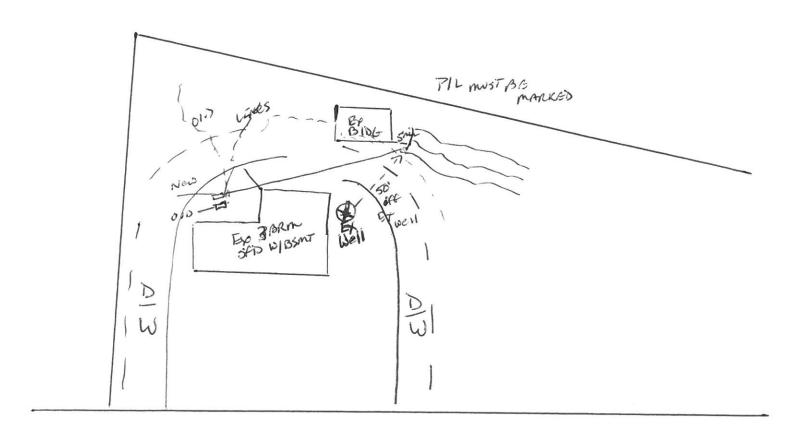
## Harnett County Department of Public Health

Improvement Permit

A building pe	PROPERTY LOCATION: 14mg 53	
ISSUED TO: Jondie McKellan	SUBDIVISION	LOT #
NEW REPAIR EXPANSION	Site Improvements required prior to	Construction Authorization Issuance:
Type of Structure: Exp SFD		
Projected Daily Flow: 360 GPD		
Number of bedrooms: Number of Occupants:	max	
Basement 🔽 fes 🔲 No		
	on final location and elevations of facilities	/
	Distance from well 55 feet	Permit valid for: Five years
Permit conditions:		No expiration
	1@seas	
Authorized State Agentinos & Manhos	Date: 4-21-20	SEE ATTACHED SITE SKETCH
The issuance of this permit by the flealth Department in no way guarantees the issuar site is subject to revocation if the site plan, plat, or the intended use changes. The lm the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit the Laws are conditionally continued to the conditions of the laws are conditionally continued to the conditions of the laws are conditionally continued to the conditions of the laws are conditionally continued to the conditions of the laws are conditionally continued to the laws are con	provement Permit shall not be affected by a change in ownership of the site.	oriate governing bodies in meeting their requirements. This This permit is subject to compliance with the provisions of
	onstruction Authorization	
<u> </u>	(Required for Building Permit)	
The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .19		and shall be met. Systems shall be installed in accordance
with the attached system layout.	and the control of th	,,
ISSUED TO: SANdia McKellon	PROPERTY LOCATION: Hand 55	
	PROPERTY LOCATION: Honey 55  SUBDIVISION Repair	LOT #
Facility Type: Sc Sc S	New Expansion Repair	
Basement? Yes No Basement Fixtures?	Yes No	
Type of Wastewater System**	(Initial) \	Wastewater Flow: 360 GPD
(See note below, if applicable )		
_ 25% Reduc	2	
	of trenches	G
	gth of each trench So feet Trench Space	ing: Feet on Center inches
	A	1 10 mm. 10
		n soil cover shall not exceed ve the trench bottom)
in all dir		ve the trench bottom)
Pump Requirements:ft. TDH vsGPM	tectoris)	inches below pipe
	Aggregate [	
Conditions: Contractor to meet	ONSETE PHOR to ENSTAU	/2 inches total
WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FI	ROM ANY PART OF SEPTIC SYSTEM OR REPAIR AREA	
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIEL		
**If applicable: I understand the system type specified is different		considerations of this parmit
ii applicable. I understand the system type specified is different	rom the type specined on the application. Taccept the	specifications of this permit.
Owner/Legal Representative Signature:		Date:
This Construction Authorization is subject to revocation if the site plan, plat, or the inte	nded use changes. The Construction Authorization shall not be transferred when	n 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
5 11	Date: 4-2	
Authorized State Agent:	Date: 9 - 2	4-21-75
( )	Construction Authorization Expiration Date:	4-21-25

## Harnett County Department of Public Health Site Sketch

Property Location:		
Property Location: Huy 55  Issued To: Subdivision Subdivision		Lot #
Authorized State Agent Marka Francis	Date: _	4-21-20
Contractor to meet onsite pain to	ENSFALL.	



This drawing is for illustrative purposes only. System installation must meet all pertinent laws, rules, and regulations.