Harnett County Department of Public Health

Improvement Permit

A	building permit cannot be issued with only an Improvement Permit	80808
	1	CN CNOSSING ON CONFIGNOR
ISSUED TO: MUT INVESTMENT		
NEW REPAIR EXPANSION	Site Improvements required prior	to Construction Authorization Issuance:
Type of Structure: 2 - 201 SWMH		The last of the second
Proposed Wastewater System Type: 25% TED SC	F10 N 8-3	
Projected Daily Flow: 480 GPD (TO	TAC	
Number of bedrooms: 2 (SACH) Number of Occupa	Ints: 4 SEACH max	
Basement Mes No		
Pump Required: Ares No May be required	ed based on final location and elevations of facilities	
Type of Water Supply: Community Public	Well Distance from well	Permit valid for: Eive years
Permit conditions:		No expiration
4	,	
Authorized State Agent::	Date: 1//19/2021	SEE ATTACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guaran	ees the issuance of other permits. The permit holder is responsible for checking with app	propriate governing bodies in meeting their requirements. This
	anges. The Improvement Permit shall not be affected by a change in ownership of the s	ite. This permit is subject to compliance with the provisions of
the Laws and Rules for Sewage Treatment and Disposal and to condition	of this permit.	
	Construction Authorization	
	(Required for Building Permit)	
7) (20) (20) (30) (4.0)	54, 1955, 1956, 1957, 1958, and 1959 are incorporated by references into this perm	nit and shall be met Systems shall be installed in accordance
with the attached system layout.	34, .1755, .1750, .1757, 1750. and .1757 are incorporated by references into this period	int and man be mee systems man be instance in accordance
with the attached system rayout.		821808
ISSUED TO: RAT INDIESTMENT	PROPERTY LOCATION: 62268 1	OUR CROSSING DR. LIGHESBOYOU
	SUBDIVISION NOUR CROSS	SING MHP LOT#
Facility Type: 7 20 State	☐ New ☐ Expansion ☐ Repair	
Facility Type: 2-23- SWMH	_ <u>_</u> .	
Basement? Yes No Basement Fixt		DW 11 49- CDD
Type of Wastewater System**	T APPUCABLE (Initia	al) Wastewater Flow:486 GPD
(See note below, if applicable)		(TOTAL)
25% NEW	TON 575 (Repair)	,
Installation Requirements/Conditions	Number of trenches	
Septic Tank Size _ Ext _ gallons	Exact length of each trench	Spacing: Feet on Center
Pump Tank Size 1000 gallons	Trenches shall be installed on contour at a Soil Cove	er: 14 _inches
Tulip Talk Size		num soil cover shall not exceed
		above the trench bottom)
		above the trench bottom
	in all directions)	Α «Λ
Pump Requirements:ft. TDH vs	GPM	inches below pipe
	Aggrega	ite Depth: inches above pipe
Conditions: PUMP TO MEDWIN / LI	MGE D-BOX EGUAL DISTRIBUTION	inches total
WATER LINES (INCLUDING IRRIGATION) MILET	E THE EDOM ANY DADT HE CEPTIC CYCTEM HE PEPAID A	DEV
	E 10FT. FROM ANY PART OF SEPTIC SYSTEM OR REPAIR A	KLA.
NO UTILITIES ALLOWED IN INITIAL OR REPAIR D	KAIN FIELD AKEA.	
**If applicable: I understand the system type specified	is different from the type specified on the application. I accept	the specifications of this permit.
ii applicable. I understand the system type specimes	is direction from the type specimes on the approximation of the approxim	7
0 " 10 " "		Date:
Owner/Legal Representative Signature:		Date.
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.		
Authorized State Agent:	Date:	1/19/2021
	Construction Authorization Expiration Date:	The state of the s
ANDIES COURIN	construction Authorization Expiration Date.	

Harnett County Department of Public Health Site Sketch

Property Location: 62 & 68 NOCK CROSSING DA. (JONESBORD NDST 1808)		
Issued To: NRT INVESTMENT Subdivision ROCK CROSSING MHP Lot#		
Authorized State Agent: Date: 11/19/202)		
7		
*PUMP TO MEDIUM/LARGE D-BOX EGUAL DISTRIBUTION		
* TENTEN CONDITION OF EXT TANK PLE-INSTACL		
LA FILTER, TIER, BAFFLE WALL, MISER(IF DEBENGED) TELLIED		
X THOUSED ON +XT OF DAY -TINGON		
APPEARS LIKELY TO BE A BLOCKAGE, SLUDGE, EXT		
, 510/36/e, EXT		
# 54		
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This drawing is for illustrative purposes only. System installation must meet all pertinent laws, rules, and regulations.		