

Harnett County Department of Public Health Improvement Permit

A building permit cannot be issued with only an Improvement Permit

PROPERTY LOCATION: 2899 OLD STAGE RD. S. (S21765)

ISSUED TO: JOE BLEDSOE SUBDIVISION _____ LOT # _____

NEW REPAIR EXPANSION Site Improvements required prior to Construction Authorization Issuance: _____

Type of Structure: EXT 3-BEDROOM SID

Proposed Wastewater System Type: 25% REDUCTION S/S / CONVENTIONAL

Projected Daily Flow: 366 GPD

Number of bedrooms: 3 Number of 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 Public Well Distance from well NA feet

Permit valid for: Five years
 No expiration

Permit conditions: _____

Authorized State Agent: [Signature] Date: 04/30/2021 SEE ATTACHED SITE SKETCH

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.

ISSUED TO: JOE BLEDSOE PROPERTY LOCATION: 2899 OLD STAGE RD. S. (S21765)

SUBDIVISION _____ LOT # _____

Facility Type: EXT 3-BL SID New Expansion Repair

Basement? Yes No Basement Fixtures? Yes No

Type of Wastewater System** NOT APPLICABLE (Initial) Wastewater Flow: 360 GPD

(See note below, if applicable CONVENTIONAL

25% REDUCTION S/S (Repair)

Installation Requirements/Conditions Number of trenches 4

Septic Tank Size 1000 gallons (NEW) Exact length of each trench 80 feet Trench Spacing: 9 Feet on Center

Pump Tank Size _____ gallons Trenches shall be installed on contour at a Soil Cover: 12-06 inches

Maximum Trench Depth of: 24-018 inches (Maximum soil cover shall not exceed

(Trench bottoms shall be level to +/-1/4" 36" above the trench bottom)

in all directions)

Pump Requirements: _____ ft. TDH vs. _____ GPM _____ inches below pipe

Aggregate Depth: NA inches above pipe

Conditions: GRAVITY TO D-BOX EQUAL DISTRIBUTION _____ 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: 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: _____ 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. SEE ATTACHED SITE SKETCH

Authorized State Agent: [Signature] Date: 04/30/2021
ANDREW CORBIN Construction Authorization Expiration Date: 04/30/2026

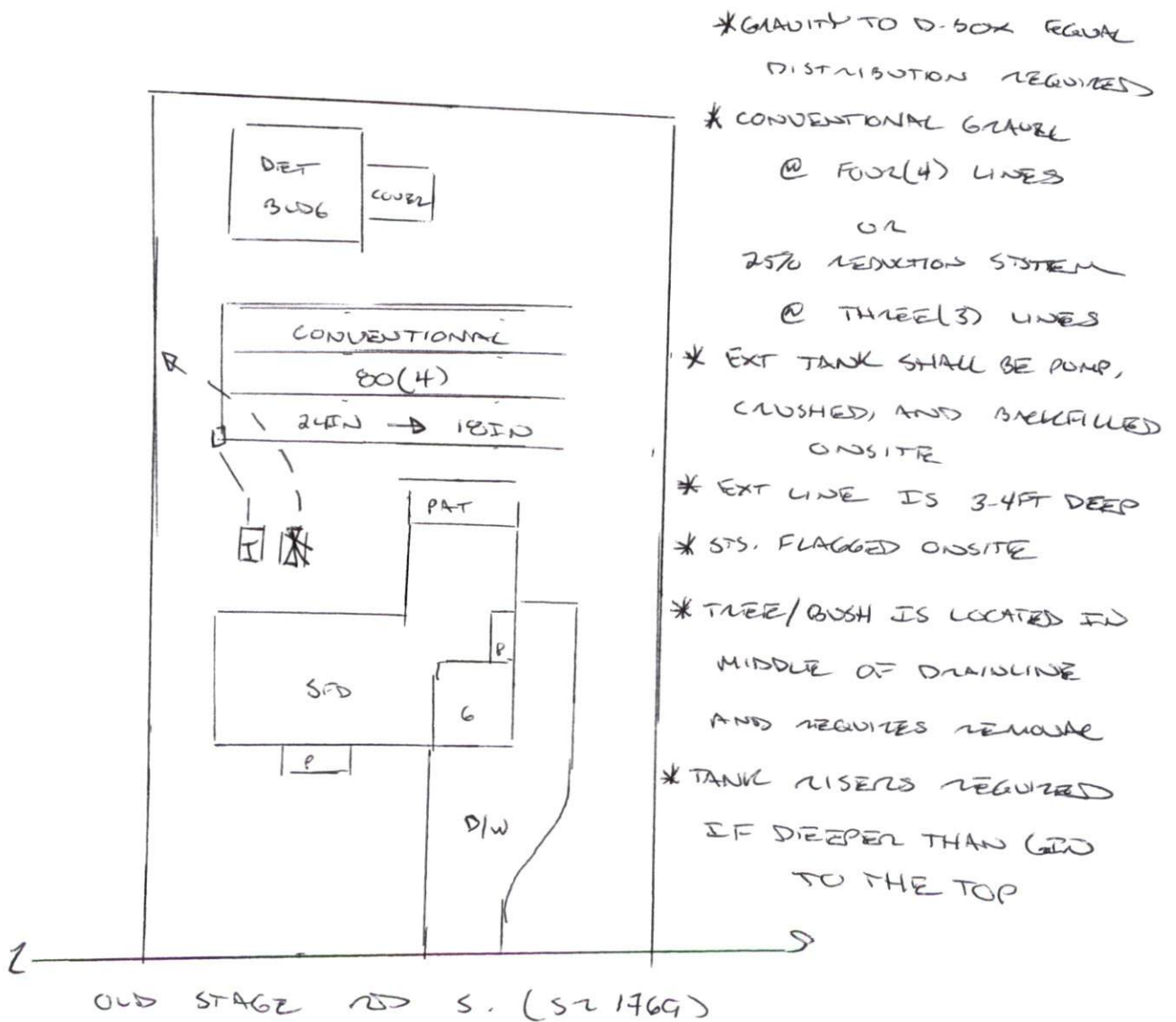
Application # EH2104-0019

Harnett County Department of Public Health Site Sketch

Property Location: 2899 OLD STAGE RD S. (S21769)

Issued To: JOE BLEDSOE Subdivision _____ Lot # _____

Authorized State Agent: _____ Date: 04/30/2021



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