Septic Tank relocation
App# EH2110-0011

Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

				PROPERTY LOCA		- DI ANITAT	101	474
ISSUED TO:				SUBDIVISION)	ORKSHIRE			LOT # 171
NEW		EXPANSION	_		Site Improvements i	required prior to Co	nstruction Authori	zation Issuance:
Type of Structure:								
Proposed Wastewater				-				
Projected Daily Flow:				MA A V				
Number of bedrooms: Basement Yes		umber of occupants.		max				
Pump Required: Ye		May be required b	ased on final le	neation and alay:	ations of facilities			
Type of Water Supply						Per	mit valid for:	Five years
Permit conditions:							,	☐ No expiration
remit conditions.								
Authorized State Agen	ıt::			Date: _			SEE ATT	ACHED SITE SKETCH
The issuance of this permit	t by the Health Departmen	nt in no way guarantees th	ne issuance of other	r permits. The permit	t holder is responsible for			meeting their requirements. This
	in if the site plan, plat, or wage Treatment and Dispos			Permit shall not be	affected by a change in o	wnership of the site. This	permit is subject to	compliance with the provisions of
the Laws and notes for see	wage Treatment and Dispo.	iai and to conditions of th	is permit.					
			Constr	uction Au	thorization			
			-	0.000	thorization			
			-	quired for Build				
	The state of the s	es .1950, .1952, .1954, .1	955, .1956, .1957.	.1958. and .1959 a	re incorporated by referen	ces into this permit and	shall be met. Systems	shall be installed in accordance
with the attached system I	ayout.							
ISSUED TO: Step	ohanie Dono	ovan		PROPERTY	LOCATION: 14	Gloucester	Ct (SR256	61)
				SUBDIVISION	ON		,	LOT #
Facility Type: Lau	undry room	addition	☐ New					
Basement? Ye					лоп 🗀 пера			
Type of Wastewater						(Initial) Wa	stawater Flow-	GPD
**						(IIIItiai) ***	stewater flow.	010
(See note below, if		ew Tank On	lv.		(Panair)			
Installation Donaissa			-					
Installation Requirer				hes		Toursh Consider		Cost on Contra
Septic Tank Size Z				each trench _				Feet on Center
Pump Tank Size _	galle			e installed on c			2 1 11	
				Depth of:			oil cover shall i	
		,		shall be level	to +/-1/4"	36" above	the trench bott	iom)
			all directions)					
Pump Requirements	::ft. T	DH vsGF	'H					inches below pipe
						Aggregate Dep	oth:	inches above pipe
Conditions: Addi								inches total
tank. new se	eptic tank w	il be placed	5 foot fro	m the ho	use foundat	ion. Old tan	k remove	d
WATER LINES (INC	CLUDING IRRIGAT	ION) MUST BE 10	OFT. FROM A	NY PART OF S	EPTIC SYSTEM OF	R REPAIR AREA		
NO UTILITIES ALLO					ici iic sisiciii oi	THE PAIN PAINE PAIN		
		The state of the s						
**If applicable: / und	derstand the system	type specified is a	lifferent from t	the type specifi	ed on the applicati	on. I accept the sp	pecifications of	this permit.
Owner/Legal Represe	entative Signature:					0	ate:	
This Construction Authoriza	ition is subject to revocation	on if the site plan, plat, or	the intended use	changes. The Constru	iction Authorization shall n	ot be transferred when t	here is a change in o	wnership of the site. This
Construction Authorization	is subject to compliance w	ith the provisions of the L	aws and Rules for '	Sewage Treatment an	nd Disposal and to the cor	ditions of this permit.	ZEE	ATTACHED SITE SKETCH
	11	1 //	,					
Authorized State A	Igent: /4/	1/1/2	REH		Date	: 11-05-21		
	on /		Const	ruction Author	rization Expiration		-26	
			COMMO	A MARION MURIO	TEMPOR ENDINGRION	Pate. II JU		

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Harnett County Department of Public Health Site Sketch

