Harnett County Department of Public Health

Improvement Permit A building permit cannot be issued with only an Improvement Permit

PROPERTY LOCATION: 1474 Turlington Road (SR 1723) ISSUED TO: Jordan & Logan Wynn REPAIR X EXPANSION Site Improvements required prior to Construction Authorization Issuance: Type of Structure: Ext. SFD under Renov, Proposed Wastewater System Type: Ext. Sys Projected Daily Flow: 360 Number of Occupants: 6 Number of bedrooms: 3 Basement Yes X No Pump Required: Yes May be required based on final location and elevations of facilities Type of Water Supply: Community Public Well Distance from well feet X Five years Permit valid for: No expiration Authorized State Agent:: 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: Jordan & Logan Wynn PROPERTY LOCATION: 1474 Turlington Road (SR 1723) LOT # SUBDIVISION Facility Type: Ext. SFD under Renov, Expansion X Repair Basement Fixtures? Yes Basement? Yes No Type of Wastewater System** Not Applicable (Initial) Wastewater Flow: 360 GPD (See note below, if applicable) Not Applicable (Repair) Number of trenches Ext. Installation Requirements/Conditions Septic Tank Size 1000 Exact length of each trench Ext. Trench Spacing: Ext. Feet on Center Pump Tank Size _____ gallons Trenches shall be installed on contour at a Soil Cover: Ext. Maximum Trench Depth of: Ext. (Maximum soil cover shall not exceed inches (Trench bottoms shall be level to +/-1/4" 36" above the trench bottom) in all directions) Pump Requirements: ______ft. TDH vs. inches below pipe Aggregate Depth: NA inches above pipe Conditions: Tank Replacement Only NA 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: 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 Construction Authorization Expiration Date: 11/09/2026 ANDREW CORRID

Harnett County Department of Public Health Site Sketch

