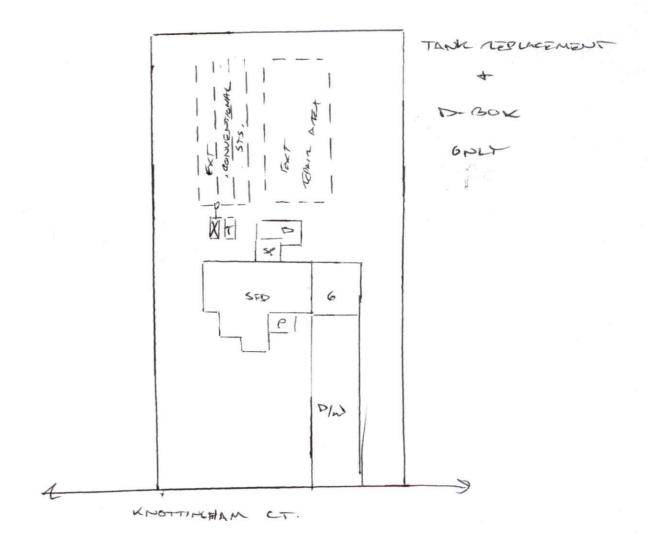
Harnett County Department of Public Health

Improvement Permit

A building permit can	PROPERTY LOCATION: 178 K-20 TINGLETANE CT. (TI WINDLE RO)					
ISSUED TO: TERRELL SAUNDERS	SUBDIVISION RESOURCE LOT # 5					
NEW ☐ REPAIR ☑ EXPANSION ☐	Site Improvements required prior to Construction Authorization Issuance:					
Type of Structure: Ext 3-06572000 SED	the improvements required prior to constitution rationalism.					
Proposed Wastewater System Type: EXT CON STOTE	^					
Projected Daily Flow: 366 GPD						
	may					
	_max					
Basement Yes No	In the second of the State of t					
Pump Required: Yes No May be required based on final I Type of Water Supply: Community Public Well Distan						
	No expiration					
Permit conditions:						
	1 6601					
Authorized State Agent::	Date: 07/22/2022 SEE ATTACHED SITE SKETCH					
	ner 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	nt 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.						
Constr	ruction Authorization					
	equired for Building Permit)					
AND STATE OF THE S	7, 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.	the state of the s					
	361704					
ISSUED TO: JENNELL SAUNDERS	PROPERTY LOCATION: 176 MNOTTHEHAM CT. (TEHMAN TO					
	SUBDIVISION NOTTING HAM LOT # 9					
Facility Type: Text 3-152 New	Expansion Repair					
Basement? Yes No Basement Fixtures? Yes	□No					
	Communication (Initial) Wastewater Flow: 360 GPD					
	25, Clac 5 3. (Illitial) Wastewater Flow 565 OF					
(See note below, if applicable)	(0)					
EXT CONU STEN						
	iches <u>Ex</u>					
,	each trench					
Pump Tank Sizegallons Trenches shall b	be installed on contour at a Soil Cover: FXT inches					
Maximum Trench	th Depth of:inches (Maximum soil cover shall not exceed					
	s shall be level to +/-1/4" 36" above the trench bottom)					
in all directions						
	EXT inches below pipe					
Pump Requirements:ft. TDH vsGPM						
	Aggregate Depth:inches above pipe					
Conditions: TANK + D-BOX REDLACEMEN	or oper inches total					
WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM A	ANY PART OF SEPTIC SYSTEM OR REPAIR AREA.					
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD ARE						
**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	e 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	r Sewage Treatment and Disposal and to the conditions of this permit. SEE ATTACHED SITE SKETCH					
Authorized State Agent: O7/22/2022						
ANDTEN CUTEN Construction Authorization Expiration Date: 07/22/2027						

Harnett County Department of Public Health Site Sketch

Property Location: 178	GOTTING HAM	CT. CT. 6	HMAN MOAD - 51	1704)	
Issued To: 5 Tentier	saunders	Subdivision	KNOTTINGHAM		Lot # _ 9
Authorized State Agent:	Man	Asprisc		_ Date: _	07/22/2022



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