Harnett County Department of Public Health

Improvement Permit

A building permit cann	oot be issued with only an Improvement Permit PROPERTY LOCATION: 24 Farmhouse Ct (SR 2197)				
ISSUED TO: Kenneth Hibbard	SUBDIVISION LOT #				
NEW REPAIR EXPANSION Type of Structure: existing house	Site Improvements required prior to Construction Authorization Issuance:				
Proposed Wastewater System Type: Replace tank & Pump					
Projected Daily Flow: 480 GPD					
Number of bedrooms: 4 Number of Occupants: 8	max				
Basement Yes No					
Pump Required:	ocation and elevations of facilities				
Type of Water Supply: Community Public Well Distant	nce from wellfeet Permit valid for: Five years No expiration				
Permit conditions:	In Expiration				
11 11					
Authorized State Agent:: Man Charles	B Date: 10-5-22 SEE ATTACHED SITE SKETCH				
The issuance of this permit by the Health Department in no way guarantees the issuance of other	er permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This Permit shall not be affected by a change in ownership of the site. This permit is subject to compliance with the provisions of				
<u> </u>	A. A				
Constr	ruction Authorization				
	quired for Building Permit)				
The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .1957, with the attached system layout.	. 1958, and .1959 are incorporated by references into this permit and shall be met. Systems shall be installed in accordance				
ISSUED TO: Kenneth Hibbard	PROPERTY LOCATION: 24 Farmhouse Ct (SR 2197)				
	SUBDIVISIONLOT #				
Facility Type: New	☐ Expansion ☐ Repair				
Basement? Yes No Basement Fixtures? Yes	□ No				
Type of Wastewater System**	(Initial) Wastewater Flow: GPD				
(See note below, if applicable)					
Replace tank & Pump	(Repair)				
Installation Requirements/Conditions Number of trend	ches				
0	each trenchfeet Trench Spacing: Feet on Center				
6	e installed on contour at a Soil Cover:inches				
	n Depth of: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 vsGPM	inches below pipe				
0.1 - 1 + 0 . (Aggregate Depth: inches above pipe				
Conditions: Replace Tank + Pump S	XSTeminches total				
WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM A					
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD ARE	A.				
**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.					
Authorized State Agent: Mah de REHS					
Authorized State Agent: Note: 10-5-22					
	truction Authorization Expiration Date: 01-05-23				

Harnett County Department of Public Health Site Sketch

Issued To: Kenneth	Hibbard	Subdivision		Lot #
Authorized State Ag	411/	NEHI	Date:	10-5-22
Eplace The Septic + Pump Tanks Replace + Bring Pump up to code and working		Existing House		
Replace + Bring Pump up To Code and working		Have CT		

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