Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: 2910 Ponderosa Rd (SR 1201) ISSUED TO: Patricia Workman SUBDIVISION REPAIR X EXPANSION | Site Improvements required prior to Construction Authorization Issuance: Type of Structure: existing home Proposed Wastewater System Type: Tank replacement 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 Permit valid for: X Five years No expiration Permit conditions: 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 Patricia Workman PROPERTY LOCATION: 2910 Ponderosa Rd (SR 1201) SUBDIVISION Facility Type: existing home X Repair Expansion Basement? Yes No Basement Fixtures? Yes Type of Wastewater System** (Initial) Wastewater Flow: 360 (See note below, if applicable 1) Tank replacement Installation Requirements/Conditions Number of trenches Septic Tank Size 1000 Trench Spacing: _____ Feet on Center gallons Exact length of each trench ___ feet Soil Cover: Pump Tank Size Trenches shall be installed on contour at a Maximum Trench Depth of: (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. ____ inches below pipe Aggregate Depth: inches above pipe Conditions: Replace Tank + MCONNECT TO existing Drain Field 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. Authorized State Agent: Date: 10-14-22

Construction Authorization Expiration Date: 01-16-23

Harnett County Department of Public Health Site Sketch

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orized State Age	ent: Mah W REHY	Date: 10-14-22
1		* replace Septic
	3Br Home	
	Home	