## Harnett County Department of Public Health

Improvement Permit

	PROPERTY LOCATION: 211 Murphy (s. (SR 1116)  SUBDIVISION  LOT #
ISSUED TO: Albert Conley	SUBDIVISION LOT #
NEW ☐ REPAIR ☑ EXPANSION ☐	Site Improvements required prior to Construction Authorization Issuance:
Type of Structure: Existing Home	
Proposed Wastewater System Type: New Tank	
Projected Daily Flow: 360 GPD	
Number of bedrooms: 3 Number of Occupants: 6	_max
Basement Yes No	
Pump Required: Tes Mo May be required based on final	location and elevations of facilities
Type of Water Supply: Community Public Well Dista	nce from wellfeet Permit valid for: Five years
Permit conditions:	No expiration
Authorized State Agent::	Date: 2-/6-23 SEE ATTACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guarantees the issuance of oth	ner permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This
	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.	
Const	ruction Authorization
	equired for Building Permit)
	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.	
ISSUED TO: Albert Conley	PROPERTY LOCATION: 211 Murphy (n (SR1116)  SUBDIVISION LOT #
Facility Type: Existing Home New	SUBDIVISION LOT # LOT #
Basement? Yes No Basement Fixtures? Yes	⊠ No
Type of Wastewater System**	(Initial) Wastewater Flow: 366 GPD
(See note below, if applicable )	
TANK Only	(Repair)
	iches Existing
, , ,	each trenchfeet Trench Spacing: Feet on Center
Pump Tank Sizegallons Trenches shall	be installed on contour at a Soil Cover:inches
Maximum Trend	th Depth of:inches (Maximum soil cover shall not exceed
(Trench bottom	s shall be level to +/-1/4" 36" above the trench bottom)
in all directions	
Pump Requirements: ft. TDH vsGPM	inches below pipe
	Aggregate Depth: inches above pipe
Conditions:	
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 AR	EA.
**If applicable: 1 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:	
	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	or Sewage Treatment and Disposal and to the conditions of this permit.  SEE ATTACHED SITE SKETCH
411 11	4.4.25
Authorized State Agent: Mal U Rens	Date: 2-16-23  Struction Authorization Expiration Date: 2-16-24
Con	struction Authorization Expiration Date: 2-16-24
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## Harnett County Department of Public Health Site Sketch

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