

HTE# Repair

Harnett County Department of Public Health

Improvement Permit

26785

A building permit cannot be issued with only an Improvement Permit

PROPERTY LOCATION: 2829 Langdon Rd.ISSUED TO: Kent Langdon

SUBDIVISION _____

LOT # _____

NEW ☐ REPAIR ☒ EXPANSION ☐

Site Improvements required prior to Construction Authorization Issuance: _____

Type of Structure: Existing SFDProposed Wastewater System Type: ConventionalProjected Daily Flow: 240 GPDNumber of bedrooms: 2 Number of Occupants: 4 maxBasement ☐ Yes ☒ NoPump Required: ☐ Yes ☒ No ☐ May be required based on final location and elevations of facilitiesType of Water Supply: ☐ Community ☒ Public ☐ Well Distance from well _____ feet

Permit valid for:

☒ Five years

Permit conditions: _____

☐ No expirationAuthorized State Agent: Bryan McSwain REHSDate: 12/21/2011

SEE ATTACHED SITE SKETCH

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: Kent LangdonPROPERTY LOCATION: 2829 Langdon Rd.

SUBDIVISION _____

LOT # _____

Facility Type: Existing SFD ☐ New ☐ Expansion ☒ RepairBasement? ☐ Yes ☐ No Basement Fixtures? ☐ Yes ☐ NoType of Wastewater System** _____ (Initial) Wastewater Flow: 240 GPD(See note below, if applicable ☐)Conventional (Repair)

Installation Requirements/Conditions

Septic Tank Size Existing gallons

Pump Tank Size _____ gallons

Number of trenches 3Exact length of each trench 90 feet

Trenches shall be installed on contour at a

Maximum Trench Depth of: 18.24 inches(Trench bottoms shall be level to $\pm 1/4"$

in all directions)

Trench Spacing: 9 Feet on CenterSoil Cover: 6-12 inches

(Maximum soil cover shall not exceed

36" above the trench bottom)

Pump Requirements: _____ ft. TDH vs. _____ GPM

Aggregate Depth: 6 inches below pipe2 inches above pipe12 inches totalConditions: Run lines on contour which may be different than sketch

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: _____

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.

SEE ATTACHED SITE SKETCH

Authorized State Agent: Bryan McSwain REHSDate: 12/21/2011Construction Authorization Expiration Date: 12/21/2016

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Permit # 26785

Harnett County Department of Public Health Site Sketch

ISSUED TO: Kent Langdon PROPERTY LOCATOR: 2829 Langdon Rd.
SUBDIVISION _____ LOT # _____

Authorized State Agent: Bryan McSwain, RCHS Date: 12/21/2011

