

HTE# Repair

Harnett County Department of Public Health

27979

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

PROPERTY LOCATION: 805 Benson Rd

SUBDIVISION _____ LOT # _____

ISSUED TO: Sloan GriffinNEW ☐ REPAIR ☒ EXPANSION ☐

Site Improvements required prior to Construction Authorization Issuance: _____

Type of Structure: BuildingProposed Wastewater System Type: ExistingProjected Daily Flow: 360 GPD - HouseNumber of bedrooms: 3 Number of Occupants: 6 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 _____ feetPermit valid for: ☒ Five years
☐ No expiration

Permit conditions: _____

Authorized State Agent: Bryan McSwain, RCHSDate: 7/21/2014

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: Sloan GriffinPROPERTY LOCATION: 805 Benson Rd.

SUBDIVISION _____ LOT # _____

Facility Type: Building ☐ New ☐ Expansion ☒ RepairBasement? ☐ Yes ☐ No Basement Fixtures? ☐ Yes ☐ NoType of Wastewater System** _____ (Initial) Wastewater Flow: 360 GPD House(See note below, if applicable ☐)

(Repair)

Installation Requirements/ConditionsSeptic Tank Size 1000 gallons

Pump Tank Size _____ gallons

Number of trenches Existing

Exact length of each trench _____ feet

Trenches shall be installed on contour at a

Maximum Trench Depth of: _____ inches

(Trench bottoms shall be level to $\pm 1/4$ "

in all directions)

Trench Spacing: _____ Feet on Center

Soil Cover: _____ inches

(Maximum soil cover shall not exceed
36" above the trench bottom)

Pump Requirements: _____ ft. TDH vs. _____ GPM

_____ inches below pipe

Aggregate Depth: _____ inches above pipe

Conditions: Set new tank so it can be connected to existing
plumbing + drainfield

_____ 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: _____ 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, RCHSDate: 7/21/2014Construction Authorization Expiration Date: 7/21/2019

HTE# Repair

Permit # 27979

Harnett County Department of Public Health Site Sketch

ISSUED TO: Steen Griffin PROPERTY LOCATOR: 805 Benson Rd
SUBDIVISION _____ LOT # _____

Authorized State Agent: Bryan McSwain RPHS Date: 7/21/2014

