HTE#06-5-15770

Harment County Department of Public alth 23275

Improvement Permit

A building permit cannot be issued	with only an Improvement Permit LOCATION: BETWEL BAPTIST RD (5R 2048)
ISSUED TO: CHARLES LAYMON SUBDIVISIO	
NEW REPAIR EXPANSION	Site Improvements required prior to Construction Authorization Issuance:
Type of Structure: MANUFACTURED HOME (14×80)	the improvements required prior to construction regularity issuance.
Proposed Wastewater System Type: CONVENTIONAL	
Projected Daily Flow: 240 GPD	
Number of Dedrooms: Number of Occupants: Hmax	
Basement 🗆 Yes 📈 No	
Pump Required: □Yes □ No ⋈ May be required based on final location and	elevations of facilities
Type of Water Supply: Community Public Well Distance from well	
Permit conditions:	☐ No expiration
Authorized State Agent: Dat	te: 11 7 06 SEE ATTACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guarantees the issuance of other p	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 chan	ges. 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	d Disposal and to conditions of this permit.
Construction Authorization	
The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .1957, .1	Building Permit)
installed in accordance with the attached system layout.	750. and 1757 are incorporated by references into this permit and shall be first. Systems shall be
ISSUED TO: CHARLES LAYMON PROP	ERTY LOCATION: BETHEL BAPTIST RO (SR2048)
CURN	IVISION DELBERT LAYMAN LOT # 1
racility type: THANDISACTORED TOTAL CHANGE TO THE PROPERTY TO THE CHANGE THE PROPERTY TO THE CHANGE THE PROPERTY TO THE CHANGE THE C	xpansion Repair
Basement? ☐ Yes 🔀 No Basement Fixtures? ☐ Yes ☐ No	011 a ann
Type of Wastewater System** CONVENTION RL (Initial)	Wastewater Flow: _240 GPD
(See note below, if applicable \square)	
PUMP TO CONVENTIONAL	(Repair)
Installation Requirements/Conditions	
2 TRE	:rchEs
Septic Tank Size 1000 gallons Exact length of each trench	feet Trench Spacing: Feet on Center
Pump Tank Size gallons Trenches shall be installed	
	and inches (Maximum soil cover shall not exceed
(Trench bottoms shall be le	
,	Ter to 17-174 30 above the trenen bottom)
in all directions)	C inches below also
Pump Requirements:ft. TDH vs GPM	inches below pipe
0 6 7	Aggregate Depth: a inches above pipe
Conditions: REMOVE ROW OF SILK TREES	inches total
**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:
Owner/Legal Representative Signature: This Construction Authorization is subject to revocation if the site plan, plat, or the intended use ch	nanges. 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: Whiles (OLIVER TOL	

Construction Authorization Expiration Date: 11

Harnett County Department of Public Health Site Sketch

