HTE# 500 1812-0044 Harnett County Department of Public Health

Improvement Permit

A	building permit cannot be issued with only an Improvement Permit	
ISSUED TO Ashton Copple Pora	PROPERTY LOCATION: 26 Indigo St. (Neills C SUBDIVISION South Creek	
NEW ☐ REPAIR ☐ EXPANSIO		LOT # <u>41</u>
Type of Structure: 432 64.51×631		horization Issuance:
Proposed Wastewater System Type: 25% 10	A. How Se	
Projected Daily Flow: 485 GPD	20(300) 36-	
Number of bedrooms: 4 Number of Occu	pants: 8 max	
Basement Yes No	THEAT THEAT	
Pump Required: Tes No May be required:	ired based on final location and elevations of facilities	
Type of Water Supply: Community Public	☐ Well Distance from well feet Permit valid for:	Five years
Permit conditions:	Termit function.	☐ No expiration
		- no expiration
	2	
	Date: 01/09/2019 SEE A	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 cherking with appropriate governing hodger in most in the permit holder is responsible for cherking with appropriate governing hodger in most include the permit holder is responsible for cherking with appropriate governing hodger.		
the Laws and Rules for Sewage Treatment and Disposal and to condition	nanges. 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
and to condition	s of this perinic.	
	Company of the Auditor of	
	Construction Authorization	
	(Required for Building Permit)	
The construction and installation requirements of Rules .1950, .1952, .19 with the attached system layout.	954, .1955, .1956, .1957, .1958. and .1959 are incorporated by references into this permit and shall be met. Syste	ms shall be installed in accordance
30 33 35 45 45 45 45 45 45 5	<	11513
ISSUED TO: Ashton Creek Prop., UC PROPERTY LOCATION: 26 Indign St. (Neills Creek Rd.) SUBDIVISION South Error LOT # 41		
SURDIVISION STATES TO THE STATE OF THE STATES TO THE STATE		
Facility Type: 432 645 x 63 500 Hew Expansion Repair		
(See note below if applicable)	- Reduction Sys. (Initial) Wastewater Flow	: GPD
(See note below, if applicable □)	204 5 1 1	
Installation Description (C. 177)	Number of trenches (Repair)	
Installation Requirements/Conditions		
Septic Tank Size 1000 gallons	Exact length of each trench 75 feet Trench Spacing: 7	_ Feet on Center
Pump Tank Size gallons	Trenches shall be installed on contour at a Soil Cover: 12	inches
	Maximum Trench Depth of: 24 inches (Maximum soil cover shall	not exceed
	(Trench bottoms shall be level to +/-1/4" 36" above the trench bo	
	in all directions)	,
Pump Requirements:ft. TDH vs	_ GPM	A inches below pipe
	Aggregate Denth:	inches above pipe
Conditions: D-Box Distribution	no Rewired	
		inches total
NATER LINES (INCLUDING IRRIGATION) MILET R	E TOET EDOM ANY DART OF CERTIC CYCTEM OR REPAIR AREA	
IO ILLI LLICO (INCLUDINO INCIDALION) MOSI D	E 10FT. FROM ANY PART OF SEPTIC SYSTEM OR REPAIR AREA.	
IO UTILITIES ALLOWED IN INITIAL OR REPAIR DI	KAIN 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.		
The specifications of this perimit.		
Owner/Legal Representative Signature:	D	
	Date:	
his 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 onstruction 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		
onstruction 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		
supposited Case Asset Control of the		
authorized State Agent: O1 09 2019		
ANDREW WALL	Construction Authorization Expiration Date: 01/09/206	24

HTE# SAD1812-0047

Permit # 30329

Harnett County Department of Public Health Site Sketch

ioi * D-BOX DISTRIBUTION REGUINED *DEED(24IN) TO SHALLOW (1800) DUSTALL MAY BE REQUIRED TH9160 STREET 15-1 2100