30451

HTE# 55701901-0017

Harnett County Department of Public Health

Improvement Permit

		A building permit can	PROPERTY LOCAT	i only an improv	vement Permit	2002 /	'sa 1122)
ISSUED TO: Stepkinson	1 Blds =7	IC.	SUBDIVISION		Juliar	, many	LOT #
NEW REPAIR		ION 🗆	_ 300011131011			r to Construction Auth	
Type of Structure: 381 G	7 × 39' 5=	D	_		1		orization issuance.
Proposed Wastewater System Type:		eduction					
Projected Daily Flow: 3 C		,					_
Number of bedrooms:3	Number of Occ	upants: <u>6</u>	_max				
Basement Yes No							
Pump Required: Tes Test Test Test Test Test Test Test	☐ May be reo	uired based on final le	ocation and elevat	tions of facilities			
Type of Water Supply: Community conditions:				ree fee	et	Permit valid for:	Five years
Permit conditions:							☐ No expiration
		2					
Authorized State Agent::	OCE	Con EH	Date:	01/29	12019	SEE A	TTACHED SITE SKETCH
The issuance of this permit by the Health D site is subject to revocation if the site plan, the Laws and Rules for Sewage Treatment a	, plat, or the intended use	changes. The Improvement	r permits. The permit Permit shall not be a	holder is responsible ffected by a change	for checking with ap in ownership of the s	propriate governing bodies ite. This permit is subject	in meeting their requirements. This to compliance with the provisions of
		Constr	uction Aut	horization	<u>1</u>		
			uired for Buildir				
The construction and installation requiremen with the attached system layout.	ts of Rules .1950, .1952, .	1954, .1955, .1956, .1957,	.1958. and .1959 are	incorporated by ref	erences into this pern	nit and shall be met. System	ns shall be installed in accordance
ISSUED TO: Stephason	Blds Inc		PROPERTY	LOCATION: <u>4</u>	ol Dano	ch road	(521128)
Facility Type: 381 67 x	391 55	New	☐ Expansi	on Re	epair	100	LUI #
Basement? Yes		xtures? Yes	□ No	VII III	cpan		
Type of Wastewater System**		reduction		Len	(Initia	J) Wastowator Flow	360 GPD
(See note below, if applicable \square)3		(111111	ii) wastewater riow.	dru
(,	bution 575	Len	(Renair)			
Installation Requirements/Condition	ons	Number of trench	hes 3	_(mcpan)			
Septic Tank Size 1000		Exact length of e		900 fe	eet Trench S	pacing:9	Feet on Center
Pump Tank Size	•	Trenches shall be			Soil Cove	er: 8	inches
	_ 8	Maximum Trench				num soil cover shall	
		(Trench bottoms	The second second second			above the trench bo	
		in all directions)		17-174	50 6	above the trench bo	ttoiii)
Pump Requirements:	ft TDH vs					۸۰ ۸	inches helew nine
- amp neganements:		0111			Aggregat	te Depth:	inches below pipe inches above pipe
Conditions:							inches above pipe
WATER LINES (INCLUDING IRI NO UTILITIES ALLOWED IN IN				PTIC SYSTEM	OR REPAIR AF	REA.	
**If applicable: I understand the	system type specifie	d is different from t	he type specified	d on the applica	ration. I accept	the specifications of	this permit.
Owner/Legal Representative Signature:							
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 compl	liance with the provisions	of the Laws and Rules for S	ewage Treatment and	Disposal and to the	conditions of this per	mit. SEE	ATTACHED SITE SKETCH
			1				
Authorized State Agent:							
Construction Authorization Expiration Date: 01 29 2024							

Harnett County Department of Public Health Site Sketch

