## Harnett County Department of Public Health A building permit cannot be issued with only an Improvement Permit

	PROPERTY LOCA	tion: <u>4926 Mc</u> E	Dougald Rd	
ISSUED TO: Lewis, Eric & Kristie	SUBDIVISION _			LOT #
NEW REPAIR EXPANSION [ Type of Structure: SFD (32'x58')		Site Improvements rec	uired prior to Construction Au	thorization Issuance:
Proposed Wastewater System Type: 25% Reduction Projected Daily Flow: 360 GPD	n System			
Number of bedrooms: 3 Number of Occupants:	6 max			
Basement Yes X No				
	based on final location and eleva	tions of facilities		
	Well Distance from well		Permit valid for	▼ Five years
Permit conditions:				■ No expiration
The second second				
Authorized State Agent::		3/29/2019		ATTACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guarantees is subject to revocation if the site plan, plat, or the intended use change the Laws and Rules for Sewage Treatment and Disposal and to conditions of the same o	The Improvement Permit shall not be a	holder is responsible for che affected by a change in owne	cking with appropriate governing bodi rship of the site. This permit is subject	es in meeting their requirements. This to compliance with the provisions of
	Construction Aut	thorization		
	(Required for Buildi			
The construction and installation requirements of Rules .1950, .1952, .1954, with the attached system layout.			into this permit and shall be met. Sys	tems shall be installed in accordance
ISSUED TO: Lewis, Eric & Kristie			McDougald Rd	107.44
CED (221/201)	SUBDIVISIO			LOT #
Facility Type: SFD (32'x58')	New Expansi	on 🗌 Repair		
Basement? Yes No Basement Fixtures				
Type of Wastewater System** 25% Reduction	n System		(Initial) Wastewater Flo	w: <u>360</u> GPD
(See note below, if applicable )				
_25% Reduction		_(Repair)		
	ımber of trenches 1			
,	act length of each trench 26		Trench Spacing: 9	
	enches shall be installed on co		Soil Cover: 6-12	inches
Ma	aximum Trench Depth of: 18	-24inches	(Maximum soil cover sha	all not exceed
(Tr	rench bottoms shall be level to	+/-1/4"	36" above the trench	bottom)
in	all directions)			
Pump Requirements:ft. TDH vsG	PM		<u></u>	inches below pipe
			Aggregate Depth:	inches above pipe
Conditions:				inches total
WATER LINES (INCLUDING IRRIGATION) MUST BE 10		EPTIC SYSTEM OR R	EPAIR AREA.	
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAI	N FIELD AREA.			
**If applicable: 1 understand the system type specified is a	different from the type specifie	d on the application.	I accept the specifications	of this permit.
Owner/Legal Representative Signature:			Date:	
This Construction Authorization is subject to revocation it the site plan, plat, o			e transferred when there is a change	in ownership of the site. This
Construction Authorization is sobject to compliance with the provisions of the I	Laws and Rules for Sewage Treatment and	Disposal and to the condition	ns of this permit.	EE ATTACHED SITE SKETCH
Authorized State Agent:	REUTS	Date:	3/29/2019	
	Sanstruction Authori	The state of the s	ate: 3/29/2024	
	Constitution Author	EMERGIA ENDITABLICIT D	VI VI V T	

HTE#	SFDI	903	0019
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Permit	#	
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## Harnett County Department of Public Health Site Sketch

ISSUED TO: LEWIS	En	1	PROPERTY LOCATON:SUBDIVISION			LOT #	_
Authorized State Agent:	20'	DECK HOUSE (3)758)  PRIVE REPAI		073	Date: 3 29/19		
·		M,	DOUGALD A	2 <sub>0</sub>		4870-40	