

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

ISSUED TO: Seven Magnolias Court PROPERTY LOCATION: on 1723 Tunlington RD
 NEW REPAIR EXPANSION SUBDIVISION _____ LOT # 4
 Type of Structure: SFB Site Improvements required prior to Construction Authorization Issuance: _____
 Proposed Wastewater System Type: 25% Red
 Projected Daily Flow: 360 GPD
 Number of bedrooms: 3 Number of Occupants: 6 max
 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 _____ feet Permit valid for: Five years
 Permit conditions: _____ No expiration

Authorized State Agent: [Signature] Date: 6-28-19 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: Seven Magnolias Court PROPERTY LOCATION: on 1723 Tunlington RD
 SUBDIVISION _____ LOT # 4
 Facility Type: SFB New Expansion Repair
 Basement? Yes No Basement Fixtures? Yes No
 Type of Wastewater System** 25% Reducta System (Initial) Wastewater Flow: 360 GPD
 (See note below, if applicable 25% Reducta (Repair))

Installation Requirements/Conditions

| | | |
|------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|
| Septic Tank Size <u>1000</u> gallons | Number of trenches <u>2</u> | Trench Spacing: <u>9</u> Feet on Center |
| Pump Tank Size <u>1000</u> gallons | Exact length of each trench <u>120</u> feet | Soil Cover: <u>6</u> inches |
| | Trenches shall be installed on contour at a Maximum Trench Depth of: <u>24-18</u> inches (Trench bottoms shall be level to +/-1/4" in all directions) | (Maximum soil cover shall not exceed 36" above the trench bottom) |
| Pump Requirements: _____ ft. TDH vs. _____ GPM | | Aggregate Depth: <u>6</u> inches below pipe <u>2</u> inches above pipe <u>12</u> inches total |

Conditions: Contractor to meet on site prior to install. Pipes before planting is stubbed out.

**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: [Signature] Date: 6-28-19
 Construction Authorization Expiration Date: 6-28-24

HTE# SFD1904-0062

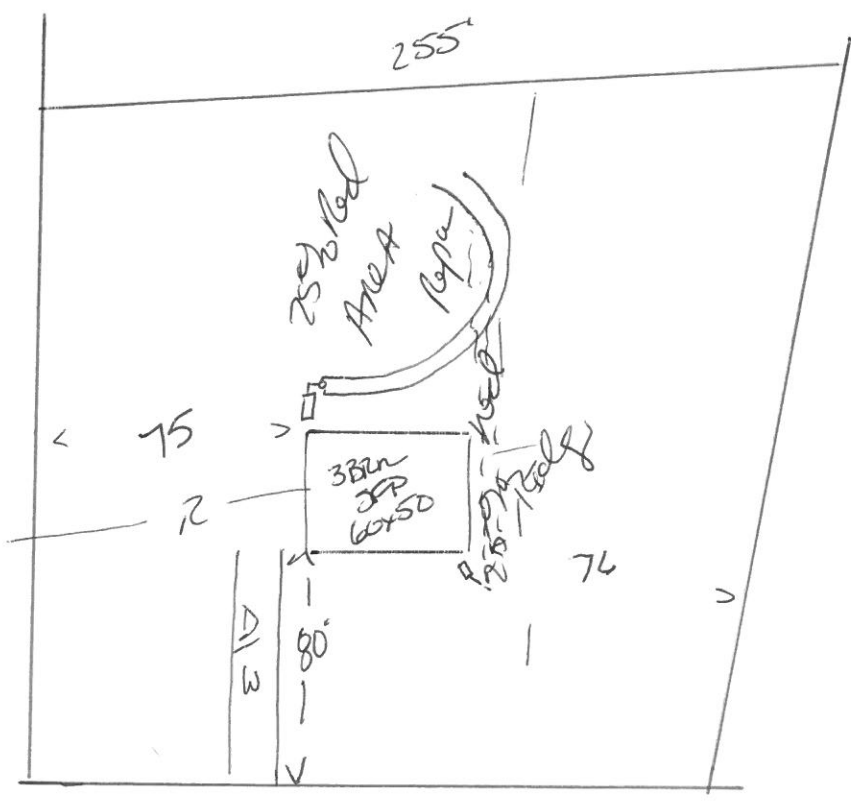
Permit # 30531

Harnett County Department of Public Health Site Sketch

ISSUED TO: Seven Magnolias Court PROPERTY LOCATION: SR 1723 TURLINGTON RD
SUBDIVISION _____ LOT # 4

Authorized State Agent: Jana E. Matheson IP 12618 Date: 6-28-11

- * Contractor to meet on-site prior to install.
- * Trip may be required
- * Layout may change from illustration
- * THIS DRAWING IS FOR ILLUSTRATION PURPOSES ONLY,
System install must meet all pertinent laws, rules, and regulations
- * NO WATER OR POWER IN SEPTIC AND REPAIR AREA.
- * All corners to be verified at final.



SR 1723 TURLINGTON RD