## HTE# 542 1905-0016

## Harnett County Department of Public Health

Improvement Permit

A	building permit cannot be issued with only an Improvem	ent Permit
ISSUED TO: ON TOP BUTILDING CO	mpary (Charles Wyra R.	Le OYD STREAR RD
NEW □ REPAIR □ EXPANSION		required prior to Construction Authorization Issuance:
Type of Structure:	i ii jite iiiprovenients	required prior to construction Authorization issuance.
Proposed Wastewater System Type: 25% Red	-6	
Projected Daily Flow: 366 GPD		
Number of bedrooms: 3 Number of Occup	ants: 6 max	
Basement Wes No		
Pump Required: Pres  No  May be required	red 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
	1 - 2	•
\$ M.	1. 1023	-19
Authorized State Agent:	Date: 5-37	SEE ATTACHED SITE SKETCH
site is subject to revocation if the site plan, plat, or the intended use ch the Laws and Rules for Sewage Treatment and Disposal and to conditions	anges. The Improvement Permit shall not be affected by a change in o	checking with appropriate governing bodies in meeting their requirements. This ownership of the site. This permit is subject to compliance with the provisions of
the Laws and notes for sewage freatment and disposal and to conditions	of this permit.	
	Construction Authorization	
The construction and installation was invested to the LOCO LOCAL LOCAL	(Required for Building Permit)	
with the attached system layout.	14, .1955, .1956, .1957, .1958. and .1959 are incorporated by referen	nces into this permit and shall be met. Systems shall be installed in accordance
ISSUED TO: 6W TOP BUELD Cong	PROPERTY LOCATION:	
/ 3	SUBDIVISION WGON.	
Facility Type:	🗹 New 🗆 Expansion 🖆 Repa	iir 🍼
Basement? Yes No Basement Fixtu		
Type of Wastewater System** 25% 738	SOUCOLON JUSTA	(Initial) Wastewater Flow: 360 GPD
(See note below, if applicable   )	10	
50201	(Repair)	
Installation Requirements/Conditions	Number of trenches	C
Septic Tank Size gallons	Exact length of each trench feet	Trench Spacing: Feet on Center
Pump Tank Size 1000 gallons	Trenches shall be installed on contour at a	Soil Cover: 6 inches
,	Maximum Trench Depth of: 22->18 inche	
	(Trench bottoms shall be level to +/-1/4"	36" above the trench bottom)
	in all directions)	30 above the trenen bottom)
Pump Requirements:ft. TDH vs		( inches helew nine
tump requirements.	_ 0111	Aggregate Depth: Z inches above pipe
Conditions		Aggregate Deptil: inches above pipe
Conditions:		inches total
WATER LINES (INCLUDING IRRICATION) MIST BE	C LOCT CDOM ANY DART OF CERTIC CYCTEM OF	D DEDAID ADEA
WATER LINES (INCLUDING IRRIGATION) MUST BI		K KEFAIK AKEA.
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DE	KAIN FIELD AKEA.	
**If applicable: I understand the system type specified	is different from the type specified on the applicati	on. I accept the specifications of this permit.
Owner/Legal Representative Signature:  This Construction Authorization is subject to revocation if the site plan, plants of the site plants plants of the site plants plants of the site plants		Date:
This Construction Authorization is subject to revocation if the site plan, pla	at, or the intended use changes. The Construction Authorization shall n	ot 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.		
31/14		
Authorized State Agent: Date: 5-31-19		
Construction Authorization Expiration Date: 5-31-29		

## Harnett County Department of Public Health Site Sketch

PROPERTY LOCATON: SUDOCO OND STACOR RD
ISSUED TO: AN OPENISON (Company SUBDIVISION A) WAS ALCO -0 10T # 32
5 MI LOWKERS W 71 18
Authorized State Agent: Date: 5 31 77
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* 15' off Brisement ( Ef Buch)  * Pup may NOT BE NEEDED
to Plans Marray 35 35 a) FEDE
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201 20
38'
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1 DAPPI A.