Harnett County Department of Public Health

Improvement Permit

	A building permit cannot be issued with only an Improveme	nt Permit	171
ISSUED TO: Southern Tour	h Homes PROPERTY LOCATION: 152 L	my Creek Rd,	Cillington
		aniad air a Cara air Adair	LOT #
Type of Structure: SFD 3hdrn)	equired prior to Construction Authorizat	ion Issuance:
Proposed Wastewater System Type: 251. 2	eduction IIIa.		
Projected Daily Flow: 360 GPD	3		
Number of bedrooms: 3 Number of O	ccupants: max		
Basement Yes No			
Pump Required: Yes No May be r	equired based on final location and elevations of facilities		
	Well Distance from wellfeet	Permit valid for:	Five years
Permit conditions:			☐ No expiration
	-		
Authorized State Agent: Janes & Man	han Date: 7-17-18	CEE ATTACU	ED CITE CRETCH
The issuance of this permit by the Health Department in no way go	varantees the issuance of other permits. The permit holder is responsible for ch	pecking with appropriate governing hodies in mee	ED SITE SKETCH
site is subject to revocation in the site plan, plat, or the intended t	use changes. The Improvement Permit shall not be affected by a change in owi	nership of the site. This permit is subject to comp	oliance with the provisions of
the Laws and Rules for Sewage Treatment and Disposal and to cond	itions of this permit.		
	Construction Authorization		
	(Required for Building Permit)		
The construction and installation requirements of Rules .1950, .1952 with the attached system layout.	1954, .1955, .1956, .1957, .1958. and .1959 are incorporated by references	into this permit and shall be met. Systems shall	be installed in accordance
· · · · · · · · · · · · · · · · · · ·			
ISSUED TO: Southern low	h Homes Property Location: 132	2 Dry Creek Ro	1, Cillington
Facility Type: SFO 3bdrm	30001131011		LOT #
	New Expansion Repair		
Type of Wastewater System**	Fixtures? Yes No		2(-0
(See note below, if applicable)	reduction III.g.	(Initial) Wastewater Flow:	GPD GPD
25%. 10	reduction III a (Repair)		
Installation Requirements/Conditions			
1000	Number of trenches 33		
Pump Tank Sizegallons	Exact length of each trenchfeet Trenches shall be installed on contour at a		t on Center
ganons	. 67	Soil Cover:inche	-
	Maximum Trench Depth of:inches (Trench bottoms shall be level to +/-1/4"	(Maximum soil cover shall not e	exceed
	. ▼ • • • • • • • • • • • • • • • • • •	36" above the trench bottom)	
Pump Requirements:ft. TDH vs	in all directions) GPM		* 1 11 7
Tump Reduitementsit. 1DH 45	0771	Aggregate Depth:	_ inches below pipe
Conditions			
conditions.			inches total
WATER LINES (INCLUDING IRRIGATION) MALES	TOT YOUT FROM HIM DANK OF CERTIC CHARLES		
WATER LINES (INCLUDING IKKIGATION) MUS	T BE 10FT. FROM ANY PART OF SEPTIC SYSTEM OR I	REPAIR AREA.	
NO UTILITIES ALLOWED IN INITIAL OR REPAIR	DRAIN FIELD AREA.		
**If applicable: I understand the system type specifi	ied is different from the type specified on the application.	I accept the specifications of this	permit
	,, , , , , , , , , , , , , , , , , , , ,	, and specimental end of this p	Jernine.
Owner/Legal Representative Signature:		Date:	
This Construction Authorization is subject to revocation if the site plan	n, plat, or the intended use changes. The Construction Authorization shall not t	be transferred when there is a change in ownersh	ip 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 conditi	ons of this permit. SEE ATTA	CHED SITE SKETCH
Authorized State Agent Some & Man	Lanf Date:	7-17-15	
00110	Construction Authorization Expiration D	ate: 7 -17 -24	
TAL (10)	TOTAL CONSTRUCTION AUTHORIZATION EXPIRATION D	aic.	_

HTE# 5	FD	1906	-0036
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Permit # _____

Harnett County Department of Public Health Site Sketch

ISSUED TO: Souther n Touch Homes SUBDIVISION ______ LOT #_____ LOT #_____ Authorized State Agent: * Drawing NTS Repair Area *This drawing is for 21' 49'

Dry Creek Rd.