SF	01906	-003	9
Appa	#		

Harnett County Department of Public Health

Improvement Permit

A	building permit cannot be issued with only an Improvement	t Permit		
ISSUED TO: Michael Weaves	PROPERTY LOCATION: 303 (5)	illard road (sr. 1437)		
NEW ☐ REPAIR ☐ EXPANSIO		quired prior to Construction Authorization Issuance:		
Type of Structure: 4-32000 781x50		quired prior to construction Authorization issuance:		
Proposed Wastewater System Type: 25% Ned	v tion S			
Projected Daily Flow: 48G GPD	23.			
	ants: 8 max			
Basement Yes No	uno.			
	red based on final location and elevations of facilities			
Type of Water Supply: Community Public	Well Distance from well 50+ feet	Permit valid for: Five years		
Permit conditions:		No expiration		
Authorized State Agent::	11 / NEHS Date: 07/11/			
The issuance of this permit by the Health Department in no way guaran	tees the issuance of other permits. The permit holder is responsible for che	cking with appropriate governing bodies in meeting their requirements. This		
site is subject to revocation if the site plan, plat, or the intended use of the Laws and Rules for Sewage Treatment and Disposal and to condition	ranges. The Improvement Permit shall not be affected by a change in owner	ership of the site. This permit is subject to compliance with the provisions of		
the cars and notes for sewage realment and disposal and to continue	or this permit.			
	Company Aughanian A			
	Construction Authorization			
	(Required for Building Permit)			
The construction and installation requirements of Rules .1950, .1952, .19	54, .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: Michael Weaves	PROPERTY LOCATION: 503	5 Billiary road (59 1437)		
	PROPERTY LOCATION: 503 SUBDIVISION	101 #		
Facility Type: 4th 78 1x586" SFD		LOI #		
Basement? Yes No Basement Fixt		1190		
Type of Wastewater System**	o reduction system	(Initial) Wastewater Flow: GPD		
(see note below, if applicable [])	•			
	25% redo Sys. (Repair)			
Installation Requirements/Conditions	Number of trenches 4	0		
Septic Tank Size 1250 gallons	Exact length of each trenchfeet	Trench Spacing: 9 Feet on Center		
Pump Tank Sizegallons	Trenches shall be installed on contour at a	Soil Cover: 14-96 inches		
	Maximum Trench Depth of: 26-18 inches	(Maximum soil cover shall not exceed		
	(Trench bottoms shall be level to +/-1/4"	36" above the trench bottom)		
	in all directions)	1		
Pump Requirements:ft. TDH vs	GPM	NA inches below pipe		
	— wesse	Aggregate Depth: NA inches above pipe		
Conditions:				
WATER LINES (INCLUDING IRRIGATION) MUST R	T TOUT FROM ANY RADT OF CERTIC CYCTEM OR R	EDAID ADEA		
VALER LINES (INCLUDING IKKIGATION) MUST B	E 10FT. FROM ANY PART OF SEPTIC SYSTEM OR R	EPAIK AKEA.		
IO UTILITIES ALLOWED IN INITIAL OR REPAIR D	RAIN 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		
- // // /	and the type specimes on the apprecion.	, accept the specimentons of this perime.		
Owner/Legal Representative Signature:		Date:		
his 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				
onstruction 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				
	The control and proposal and to the control	SEE MITACILED SITE SKETCH		
uthorized State Agent: 6 - 1112 - 19				
Authorized State Agent:		07/11/2019		
AND VEW CORR COnstruction Authorization Expiration Date: 07/11/2024				

Harnett County Department of Public Health Site Sketch

