

Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

PROPERTY LOCATION: 822 Hoover Rd. Sanford (SR#1210) LOT # _____

ISSUED TO: Linda Johnson SUBDIVISION _____

NEW REPAIR EXPANSION Site Improvements required prior to Construction Authorization Issuance: _____

Type of Structure: SFD 42'x32'

Proposed Wastewater System Type: 25% Reduction

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 conditions: _____ Permit valid for: Five years No expiration

Authorized State Agent: Chris Cochran PEHS Date: 12/15/2019 SEE ATTACHED SITE SKETCH

The issuance of this permit by the Health Department in any way guarantees the fitness of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This site is subject to re-evaluation 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 Ruler .1950, .1951, .1952, .1953, .1954, .1955, .1956, .1957, .1958, and .1959 are incorporated by reference into this permit and shall be met. Systems shall be installed in accordance with the attached system layout.

ISSUED TO: Linda Johnson PROPERTY LOCATION: 822 Hoover Rd. Sanford LOT # _____

Facility Type: SFD 42'x32' SUBDIVISION _____

Basement: Yes No New Expansion Repair

Type of Wastewater System: 25% Reduction Yes No

(See note below, if applicable) (Initial) Wastewater Flow: 360 GPD

Installation Requirements/Conditions: 25% Reduction (Repair)

Septic Tank Size: 1000 gallons

Pump Tank Size: _____ gallons

Number of trenches: 3

Exact length of each trench: 100 feet

Trenches shall be installed on contour at a Trench Spacing: 9 feet on Center

Maximum Trench Depth of: 18 inches

(Trench bottoms shall be level to +/- 1/4" Maximum soil cover shall not exceed 36" above the trench bottom)

in all directions)

Pump Requirements: _____ ft. TDH vs. _____ GPM

Aggregate Depth: _____ inches below pipe

_____ inches above pipe

_____ inches total

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: Chris Cochran PEHS Date: 12/15/2019

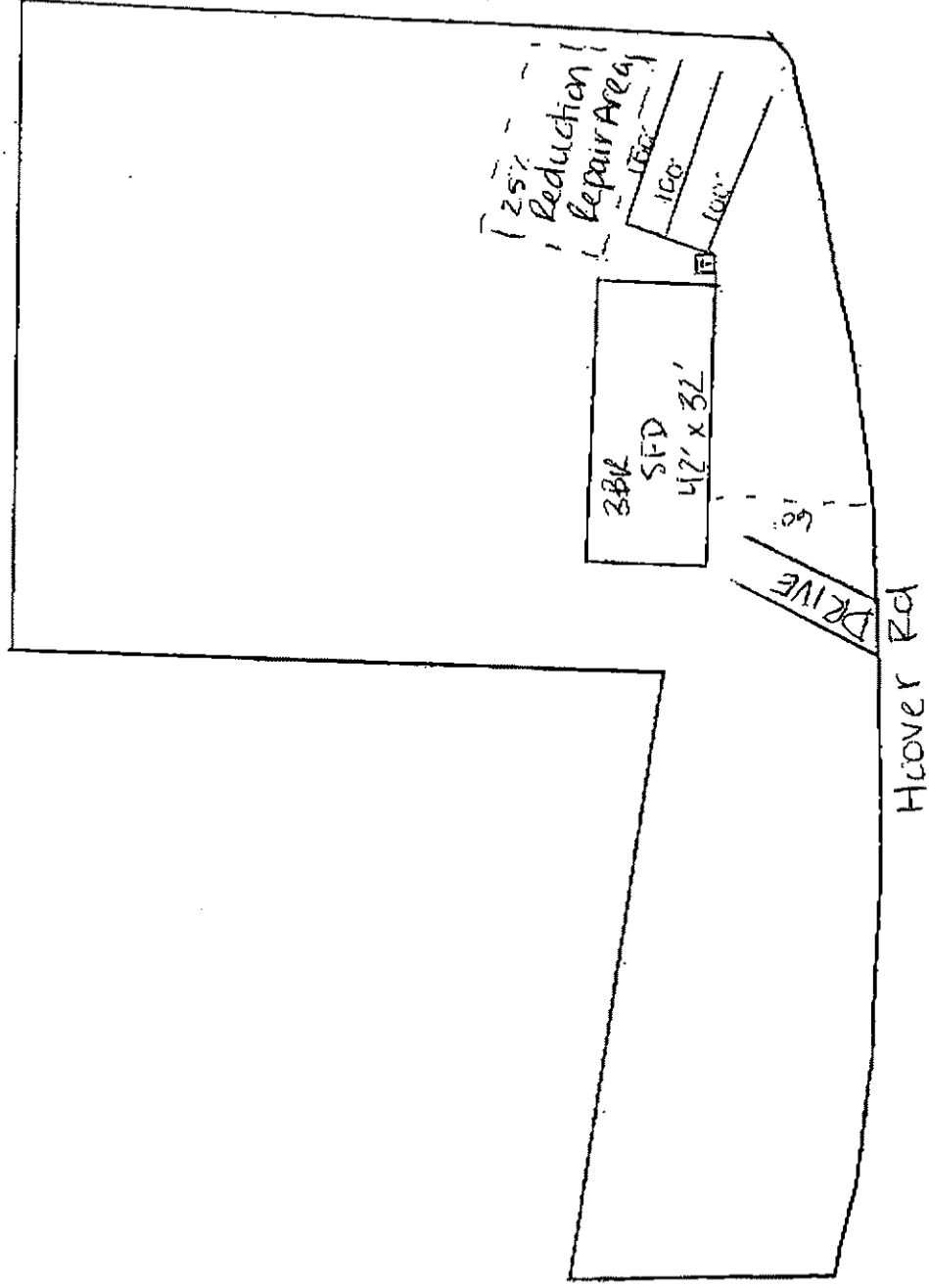
Construction Authorization Expiration Date: 12/15/2024

Application # SED1911-002Z

Hammett County Department of Public Health
Site Sketch

Property Location: 822 Hoover Rd Sanford (SZ# 1210) Lot # _____
Issued To: Linda Johnson Subdivision _____

Authorized State Agent: Bryad REHS Date: 12/5/19



This drawing is for illustrative purposes only. System installation must meet all pertinent laws, rules, and regulations.