## Harnett County Department of Public Health

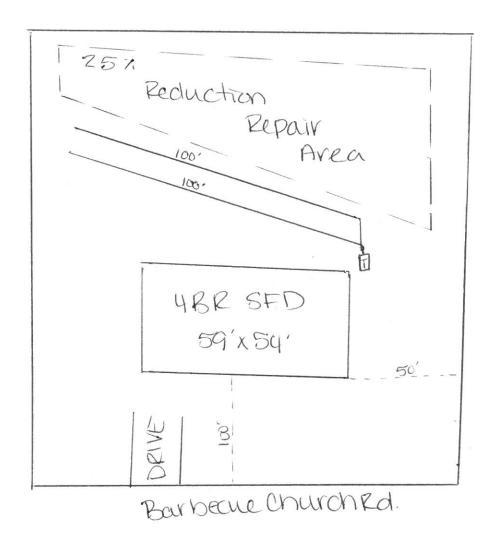
## Improvement Permit

A building permit cannot be issued with only an Improvement Permit

ISSUED TO: Paul A. Lyon	PROPERTY LOCATION: 4084 Bar SUBDIVISION	becue Church Ra	(SR#1209) LOT # 2
NEW REPAIR EXPANSION		quired prior to Construction Aut	
Type of Structure: SFD 59'x54'			
Proposed Wastewater System Type: 25% Reduction			
Projected Daily Flow: 480 GPD  Number of bedrooms: 4 Number of Occupants: 8	max		
Basement Yes X No	_max		
Pump Required: Yes No May be required based on final	location and elevations of facilities		
Type of Water Supply: Community Public Well Dista  Permit conditions:		Permit valid for:	⊠ Five years             □ No expiration             □
Authorized State Agent::  The issuance of this permit by the Health Department in no way guarantees the issuance of othe site is subject to revocation if the site plan, plat, or the intended use changes. The Improvement the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.		ecking with appropriate governing bodie	
Consti	ruction Authorization		
	quired for Building Permit)		
The construction and installation requirements of Rules 1950, 1952, 1954, 1955, 1956, 1957 with the attached system layout.		into this permit and shall be met. Syst	ems shall be installed in accordance
ISSUED TO: Paul A. Lyon	PROPERTY LOCATION: 4084 SUBDIVISION	Barbecue Church	
Facility Type: SFD 59'x54'	Expansion Repair		201 // 2
Basement? Yes No Basement Fixtures? Yes	⊠ No		
Type of Wastewater System** 25% Reduction	<u> </u>	(Initial) Wastewater Flow	w: 480 GPD
(See note below, if applicable ()		(mila) wastewater mo	
25% Reduction	(Repair)		
	thes 2		
	each trench 100 feet	Trench Spacing: 9	Feet on Center
	e installed on contour at a	Soil Cover: 6	inches
	Depth of: 18-24 inches	(Maximum soil cover sha	ll not exceed
	shall be level to +/-1/4"	36" above the trench b	
in all directions)			
Pump Requirements:ft. TDH vsGPM		Name and American	inches below pipe
		Aggregate Depth:	inches above pipe
Conditions:			inches total
WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM A NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD ARE		REPAIR AREA.	
**If applicable: 1 understand the system type specified is different from	the type specified on the application	. I accept the specifications c	of this permit.
Owner/Legal Representative Signature:		Date:	
	changes. The Construction Authorization shall not		in ownership of the site. This
Owner/Legal Representative Signature:  This Construction Authorization is subject to revocation if the site plan, plat, or the intended use Construction Authorization is subject to compliance with the provisions of the Laws and Rules for		be transferred when there is a change	in ownership of the site. This EE ATTACHED SITE SKETCH
This Construction Authorization is subject to revocation if the site plan, plat, or the intended use Construction Authorization is subject to compliance with the provisions of the Laws and Rules for Authorized State Agent:	Sewage Treatment and Disposal and to the condit	be transferred when there is a change is sons of this permit.	

## Harnett County Department of Public Health Site Sketch

Property Location: 4084 Barbeaul C Issued To: Paul A. Won Subdiv	nurch Rd (SR#1209)
Issued To: Ruy A. Wan Subdiv	ision Lot # <u> </u>
Authorized State Agent: But Alch LE	H5-I Date: 117/2020



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