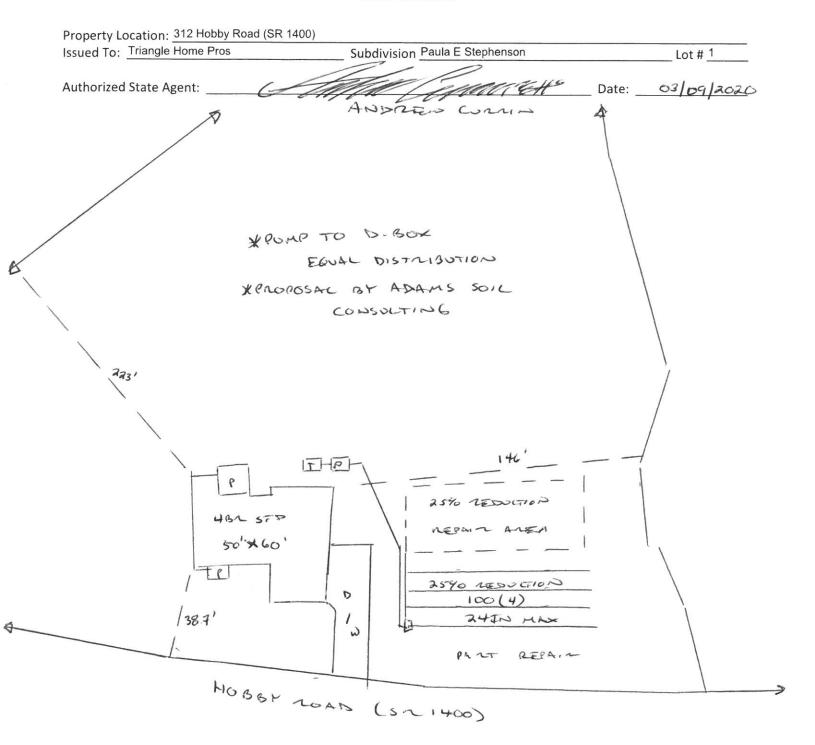
Harnett County Department of Public Health

A building permit cannot be issued with only an Improvement Permit

www. zo. Triangle Harra Dues	PROPERTY LOCATION: 312 HODBY Road (SR 1400)
ISSUED TO: Triangle Home Pros	SUBDIVISION PAULA E STEPHENSON LOT # 1
NEW REPAIR EXPANSION FOX 60 of d 4 hodroome	Site Improvements required prior to Construction Authorization Issuance:
Type of Structure: 50x60 sfd, 4 bedrooms	
Proposed Wastewater System Type: 25% Reduction System Projected Daily Flow: 480 GPD	
Projected Daily Flow: 480 GPD Number of bedrooms: 4 Number of Occupants: 8	
Basement Yes X No	_max
Pump Required: ⊠Yes No May be required based on final I	ocation and elevations of facilities
Type of Water Supply: Community Public Well Distar	
Permit conditions:	No expiration
	no expiration
Authorized State Agent::	H Date: 03/09/2020 SEE ATTACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guarantees the issuance of other	r permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This
site is subject to revocation of 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.	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 holes for sewage freatment and dispusal and to conditions of this permit.	
ſ.,	and the state of t
Constr	uction Authorization
	quired for Building Permit)
The construction and installation requirements of Rules .1950, .1952, .1954, .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: Triangle Home Pros	PROPERTY LOCATION: 312 Hobby Road (SR 1400)
13366 10.	SUBDIVISION PAULA E STEPHENSON LOT # 1
Facility Type: 50x60 sfd, 4 bedrooms New	Expansion Repair
Basement? Yes No Basement Fixtures? Yes	
	□ No
	(Initial) Wastewater Flow: 480 GPD
(See note below, if applicable)	
25% Reduction System	
Installation Requirements/Conditions Number of trend	
	each trench 100feet
	installed on contour at a Soil Cover: 12inches
Maximum Trench	
(Trench bottoms	shall be level to +/-1/4" 36" above the trench bottom)
in all directions)	
Pump Requirements:ft. TDH vsGPM	NA inches below pipe
	Aggregate Depth: NA inches above pipe
Conditions: Pump to D-Box Equal Distribution; Pr	oposal by Adams Soil NA inches total
WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM A	NA DY DE CEDLIC CACLETY OD DEDVID VDCV
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD AREA	6.
**If applicable: 1 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:
	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: Date: 63/09/2020	
	Date: 63/09/2020
ANDREW CURRY LONST	ruction Authorization Expiration Date: 63/01/2025

Harnett County Department of Public Health Site Sketch



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