Harnett County Department of Public Health

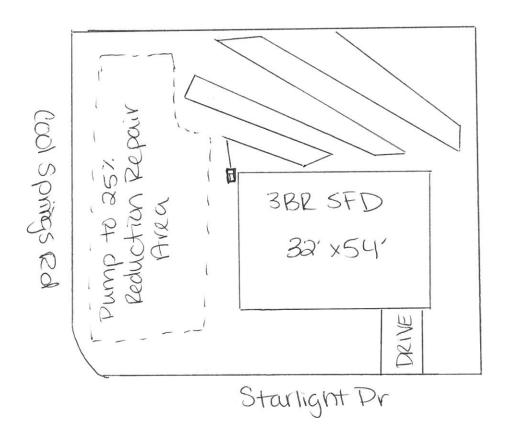
Improvement Permit

A building permit cannot be issued with only an Improvement Permit

······································	PROPERTY LOCATION: 21 Starlight Dr. Lillington (SR#1265)
ISSUED TO: Jennifer Buchanan	SUBDIVISION New Horizons LOT # 17
NEW REPAIR EXPANSION SED 221/541	Site Improvements required prior to Construction Authorization Issuance:
Type of Structure: SFD 32'x54'	
Proposed Wastewater System Type: 25% Reduction	K.
Projected Daily Flow: 360 GPD	
	max
Basement ☐Yes ☒ No Pump Required: ☐Yes ☐ No ☒ May be required based on final lo	7 1 1 7 7 11 72
Permit conditions:	The state of the s
remit conditions.	No expiration
11151	
Authorized State Agent:: Authorized State Agent::	Date: 2/11/2020 SEE ATTACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guarantees the issuance of other	permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This
site is subject to revocation if the site plan, plat, or the intended use changes. The Improvement I 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
Constru	uction Authorization
	uired for Building Permit)
	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.	and man of more and and man of more more more more market in accordance
ISSUED TO: Jennifer Buchanan	PROPERTY LOCATION 21 Starlight Dr. Lillington CD#1265
1330ED TO. OCTITION DUCTIONAL	PROPERTY LOCATION: 21 Starlight Dr. lillington SR#1265
CED 22'54'	SUBDIVISION New Horizons LOT # 17
Facility Type: SFD 32'54'	Expansion Repair
	⊠ No
Type of Wastewater System** 25% Reduction	(Initial) Wastewater Flow: 360 GPD
(See note below, if applicable (1)	
Pump to 25% Reduction	
nstallation Requirements/Conditions Number of trench	es <u>1</u>
Septic Tank Size 1000 gallons Exact length of e	ach trench 225feet
Pump Tank Sizegallons Trenches shall be	installed on contour at a Soil Cover: 6 inches
Maximum Trench	Depth of: 18-24 inches (Maximum soil cover shall not exceed
(Trench bottoms s	hall be level to +/-1/4" 36" above the trench bottom)
in all directions)	
Pump Requirements:ft. TDH vsGPM	inches below pipe
1 1	Aggregate Depth:inches above pipe
Conditions:	inches total
	Inches total
VATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM AN	V DADT OF CEDTIC CVCTCIA OD DEDAID ADEA
IO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD AREA	
*If applicable: I understand the system type specified is different from the	he type specified on the application. I accept the specifications of this permit.
Owner/Legal Representative Signature:	Date:
his Construction Authorization is subject to revocation if the site plan, plat, or the intended use ch	nanges. 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 Se	
11161	
authorized State Agent:	EHS-L Date: 2/11/2020
authorized state Agent.	Date. 2/11/2020
() ()	action Authorization Expiration Date: 2/11/2025

Harnett County Department of Public Health Site Sketch

Property Location: 21 Starlight Dr. Lillington (SR# Issued To: Jennifer Buchanan Subdivision New Honzon	1265)
Issued To: Jennifer Buchancun Subdivision New Honzon	S Lot # [7
Authorized State Agent: Soft Alch RETS I	Date: 2/11/2020



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