## Harnett County Department of Public Health

Improvement Permit

A	building permit cannot be issued with only an Improvement Permit
TOTAL COURT OF THE STATE OF THE	PROPERTY LOCATION: 1647 Main Street (521532)
	subdivision Prop. of Bc LCC 2019 LOT # 5
NEW REPAIR EXPANSIO	
Type of Structure: 3- Bedreson 46'x	Ad. 21-2
Proposed Wastewater System Type: 25% Ledu	wion 32
Projected Daily Flow: 366 GPD	
	ants:max
Basement Yes No	
	red based on final location and elevations of facilities
Type of Water Supply: Community Public	
Permit conditions:	No expiration
	leading 12 ml
Authorized State Agent:	Date: 02/27/2020 SEE ATTACHED SITE SKETCH
	tees the issuance of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This ranges. 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 condition	
8	· · · · · · · · · · · · · · · · · · ·
	Control Add in 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.	
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ISSUED TO: Gay Coloinson HO	PROPERTY LOCATION: 1647 Main Street (5/1532)
_	SUBDIVISION Prop. of Bccc 2019 LOT # 5
Facility Type: 332 46'x41' 515	New
Basement? Yes So Basement Fixt	ures? Yes No
	reduced Some (Initial) Wastewater Flow: 360 GPD
(See note below, if applicable )	
Out to be to the second of the	7 STA 11 (Ronair)
Installation Requirements Conditions	Number of trenches 5
Septic Tank Size / oco gallons	
Pump Tank Sizegallons	Trenches shall be installed on contour at a Soil Cover: 12-6 inches
	Maximum Trench Depth of: 24-18 inches (Maximum soil cover shall not exceed
	(Trench bottoms shall be level to $\pm \frac{1}{4}$ " 36" above the trench bottom)
	in all directions)
Pump Requirements: ft. TDH vs	GPM inches below pipe
7 sp requirements 12 12 13	Aggregate Depth: inches above pipe
( ) ( - 0 0 =	00 0 1
Conditions: Grandy to D. Bax E	and Distribution required
WATER LINES (INCLUDING IRRIGATION) MUST B	E 10FT. FROM ANY PART OF SEPTIC SYSTEM OR REPAIR AREA.
NO 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.
Owner/Legal Representative Signature:	Date:
This Construction Authorization is subject to revocation if the site plan, p	lat, or the intended use changes. The Construction Authorization shall not be transferred when there is a change in ownership of the site. This
	the Laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit.  SEE ATTACHED SITE SKETCH
	Date: 62/27/2020
Authorized State Agent:	W V V V V V
ANONEW COMINO	Construction Authorization Expiration Date:

## Harnett County Department of Public Health Site Sketch

