## Harnett County Department of Public Health

Improvement Permit

A bunding perint canno	PROPERTY LOCATION: 95 Morgan Form Dr. (US 4011)
155UED TO: Stepknson Blds Inc	SUBDIVISION Morger Form LOT # 4
NEW   REPAIR □ EXPANSION □	Site Improvements required prior to Construction Authorization Issuance:
Type of Structure: 4- Ozedroom 56'x64' 500	
Proposed Wastewater System Type: 35% reduction 3	٥,
Projected Daily Flow: 486 GPD	
Number of Dedrooms: Number of Occupants: m	ax
Basement ☐ Yes ♣ No Pump Required: ☐ Yes ♠ No ☐ May be required based on final local	ation and elevations of facilities
Type of Water Supply: Community Public Well Distance	
Permit conditions:	No expiration
Autorial Core Assess	( C. D C )
The issuance of this permit by the Health Department in no way guarantees the issuance of other p site is subject to revocation if the site plan, plat, or the intended use changes. The Improvement Pe the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.	Date: SEE ATTACHED SITE SKETCH ermits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This rmit shall not be affected by a change in ownership of the site. This permit is subject to compliance with the provisions of
Constru	ction Authorization
	red for Building Permit)
	958. and .1959 are incorporated by references into this permit and shall be met. Systems shall be installed in accordance
155UED TO: Stephenson Bids Inc.	PROPERTY LOCATION: 95 Morgan Form On (US 4012)  SUBDIVISION Morgan Form LOT # 4
	Expansion Repair
Type of Wastewater System** 25% reduction	on System (Initial) Wastewater Flow: 4800 GPD
(See note below, if applicable ) At-Grade Repair	zė J
Installation Requirements/Conditions Number of trenches	3
Septic Tank Size 1250 gallons Exact length of each	ch trench
Pump Tank Sizegallons Trenches shall be i	nstalled on contour at a Soil Cover:inches
Maximum Trench D	epth of:/8inches (Maximum soil cover shall not exceed
(Trench bottoms sh	all be level to +/-1/4" 36" above the trench bottom)
in all directions)	0.10
Pump Requirements:ft. TDH vsGPM	inches below pipe
	Aggregate Depth: Na inches above pipe
Conditions: Gravity to D-Box Equal	Distribution required
WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM ANY NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD AREA.	PART OF SEPTIC SYSTEM OR REPAIR AREA.
**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:
	nges. 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 Sew	
12-1	
Authorized State Agent:	MHS Date: 62/20/2026
ANDREW CHARLES CONSTRU	ction Authorization Expiration Date:

## Harnett County Department of Public Health Site Sketch

Property Location: 95 Worgen Farms Dr.	(064010.)
Issued To: Stephenson Blds Inc. Subdivision	
Authorized State Agent:	Date: 02/20/2020

\* INSTALL STS. AS HIGH ON LOT AS CONTOUR ALLOWS

