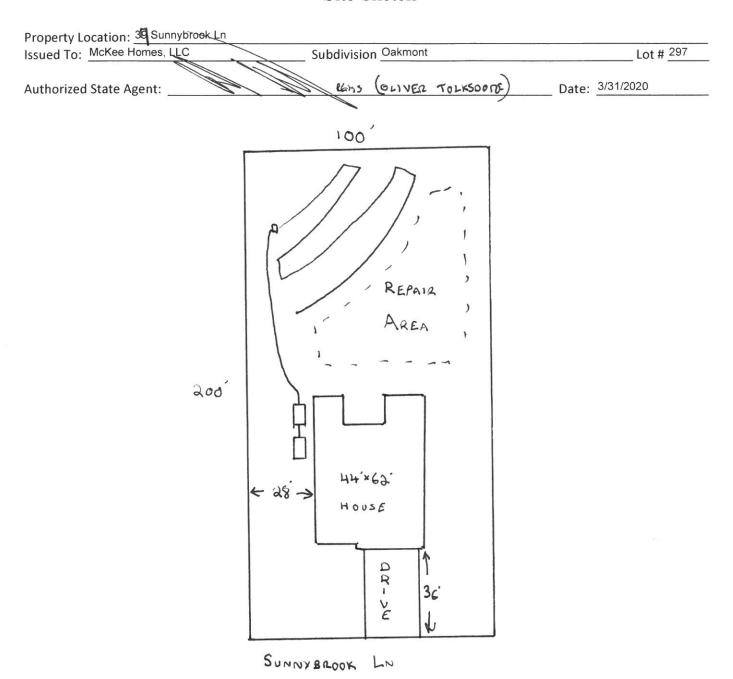
Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

A D	PROPERTY LOCA	TION: 39 Sunnybroo	k Ln		
ISSUED TO: McKee Homes	SUBDIVISION O	akmont		LOT # 297	
NEW REPAIR EXPANSION Type of Structure: SFD (44'x62')			quired prior to Construction i		
Proposed Wastewater System Type: Pump 25% Reduction	on System				
Projected Daily Flow: 600 GPD					
Number of bedrooms: 5 Number of Occupat	nts: 10 max				
Basement Yes X No					
Pump Required:	d based on final location and eleva	tions of facilities			
Type of Water Supply: Community Public [Well Distance from well	feet	Permit valid for	,	
Permit conditions:				■ No expiration	
Authorized State Agent::	eans Date: 3	/31/2020	SE	E ATTACHED SITE SKETCH	
The issuance of this permit by the Health Department in no way guarante site is subject to revocation if the site plan, plat, or the intended use chathe Laws and Rules for Sewage Treatment and Disposal and to conditions	nges. The Improvement Permit shall not be				
	Construction Au	thorization			
	(Required for Buildi	ng Permit)			
The construction and installation requirements of Rules .1950, .1952, .1954 with the attached system layout.	4, .1955, .1956, .1957, .1958. and .1959 ar	e incorporated by references	into this permit and shall be met.	Systems shall be installed in accordance	
ISSUED TO: McKee Homes	PROPERTY	LOCATION: 39 Sunn	nybrook		
		N Oakmont		LOT # 297	
Facility Type: SFD (44'x62')	New Expans				
Basement? Yes No Basement Fixtur		2			
Type of Wastewater System** Pump to 25% Redu			(Initial) Wastewater F	low: 600 GPD	
(See note below, if applicable)					
Pump to Panel Blo	ock	(Repair)			
Installation Requirements/Conditions	Number of trenches 1				
	Exact length of each trench 250		Trench Spacing: 9	Feet on Center	
	Trenches shall be installed on co		Soil Cover: 6		
3	Maximum Trench Depth of: 18	inches	(Maximum soil cover s		
	(Trench bottoms shall be level to		36" above the trench		
	in all directions)				
Pump Requirements:ft. TDH vs	GPM			inches below pipe	
Tomp Requirements.	_0111		Aggregate Denth	inches above pipe	
Conditions:			Aggregate peptili	inches total	
conditions.				menes total	
WATER LINES (INCLUDING IRRIGATION) MILET OF	JOST FROM ANY DART OF C	EDTIC CVCTEM OD I	TOAID ADEA		
WATER LINES (INCLUDING IRRIGATION) MUST BE		ELLIC 2121FW OK H	TEPAIK AKEA.		
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DR	AIN FIELD AREA.				
**If applicable: 1 understand the system type specified i	s different from the type specifie	ed on the application.	I accept the specification	s of this permit.	
Owner/Legal Representative Signature:					
This Construction Authorization is subject to revocation if the site plan, plat, or the intended use 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	ne Laws and Rules for Sewage Treatment and	Disposal and to the condition	ons of this permit.	SEE ATTACHED SITE SKETCH	
uthorized State Agent: Date: 3/31/2020					
Construction Authorization Expiration Date: 3/31/2025					

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.