Harnett County Department of Public Health

Improvement Permit

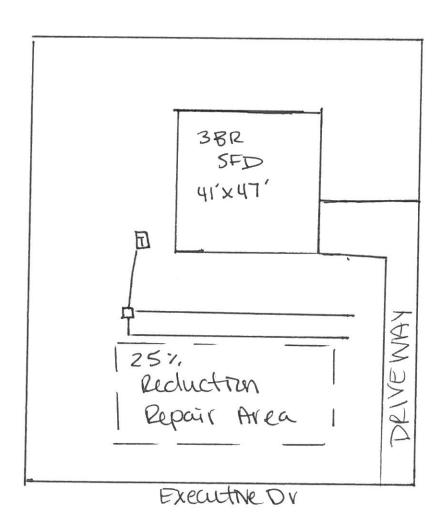
A building permit cannot be issued with only an Improvement Permit
PROPERTY LOCATION: 614 Executive Dr

	PROPERTY LOCATION. OTT LACT	Julive Di	
ISSUED TO: H&H Constructors	subdivision Oakmont		LOT # 170
NEW REPAIR EXPANSION ■	Site Improvements re	equired prior to Construction Author	rization Issuance:
Type of Structure: SFD 41'x47'			
Proposed Wastewater System Type: 25% Reduction			
Projected Daily Flow: 360 GPD			
Number of bedrooms: 3 Number of Occupants: 6	max		
Basement Yes No			
	n final location and elevations of facilities		
Type of Water Supply: Community Public Well		Permit valid for:	★ Five years
			No expiration
Permit conditions:			I No expiration
2 HILL	PEHS-I Date: 6/15/2020	CEE AND	ACHED CITE CRETCH
			ACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guarantees the issual site is subject to revocation if the site plan, plat, or the intended use changes. The In-			
the Laws and Rules for Sewage Treatment and Disposal and to conditions of this perm		incising of the site. This period is subject to	compliance with the provisions of

<u>(</u>	onstruction Authorization		
	(Required for Building Permit)		
The construction and installation requirements of Rules 1950, 1952, 1954, 1955, 19		s into this permit and shall be met. System:	shall be installed in accordance
with the attached system layout.			
ISSUED TO: H&H Constructors	PROPERTY LOCATION: 614	Executive Dr	
	SUBDIVISION Oakmont		LOT # 170
Facility Type: SFD 41'x47'	New Expansion Repair		
	Yes 🔀 No	// · · · · · · · · · · · · · · · · · ·	200
Type of Wastewater System** 25% Reduction		(Initial) Wastewater Flow:	360 GPD
(See note below, if applicable 🔲)			
25% Reduction	(Repair)		
Installation Requirements/Conditions Number	of trenches 2		
	gth of each trench 75 feet	Trench Spacing: 9	Feet on Center
		, ,	inches
1	shall be installed on contour at a		
	Trench Depth of: 18-24 inches		
(Trench	ottoms shall be level to +/-1/4"	36" above the trench bot	tom)
in all dir	ections)		
Pump Requirements:ft. TDH vsGPM			inches below pipe
rump nequirementsn. for isstr			inches above pipe
		Aggregate Deptil.	
Conditions:			inches total
WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. F	ROM ANY PART OF SEPTIC SYSTEM OR	REPAIR AREA	
		TEL AIT AITEN.	
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIEI	U AKEA.		
**If applicable: I understand the system type specified is differen	t from the type specified on the application	n. I accept the specifications of	this permit.
The applicable of an artistand the system type specimed is an even	wom the type specimes on the appreciation	raccept the specimentons of	ins primi
0 1 1 1 2		D	
Owner/Legal Representative Signature:		Date:	
This Construction Authorization is subject to revocation if the site plan, plat, or the int	100		
Construction Authorization is subject to compliance with the provisions of the Laws and	Rules for Sewage Treatment and Disposal and to the cond	itions of this permit. SEE	ATTACHED SITE SKETCH
1 11/11			
Authorized State Agent:	REHS-I Date:	6/15/2020	
MULIIOTIZEU STATE MEETIT.			
	Construction Authorization Expiration	Date: 6/15/2025	

Harnett County Department of Public Health Site Sketch

Property Location:	614	Executo	ve Dr	(OFF DOC	s ed)		
Issued To: H& H	const	nuctors	Subdivision _	calment		Lot	t# 170
Authorized State Agen	t: <u></u>	Afle	L REI	łs- <u>T</u>	Date:	6/15	2020



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