Harnett County Department of Public Health

Improvement Permit

A building permit car	PROPERTY LOCATION: 323 SMITH PRINCE 1D. (CHUSTING LT
ISSUED TO: TREWOR + AMANDA JOHNSON	SUBDIVISION LOT #
NEW ☑ REPAIR ☐ EXPANSION ☐	Site Improvements required prior to Construction Authorization Issuance:
Type of Structure: 3-6202000 69'x45' 573	2
Proposed Wastewater System Type: 25% newstrow st	۵.
Projected Daily Flow:366 GPD	
Number of bedrooms: 3 Number of Occupants: 6	_max
Basement Tes Wo	
Pump Required: Nes Mo May be required based on final	ocation and elevations of facilities
Type of Water Supply: Community Public Well Dista	
Permit conditions:	No expiration
// //	
Authorized State Agent::	Date: 67/02/2020 SEE ATTACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guarantees the issuance of other	er permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This
	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 conditions of this permit.	
Const	usation Authorization
	uction Authorization
	guired for Building Permit)
The construction and installation requirements of Rules (1950, (1952, (1954, (1955, (1956, (1957) with the attached system layout.)	. 1958. and 1959 are incorporated by references into this permit and shall be met. Systems shall be installed in accordance
ISSUED TO: TREWAR + AMARDA JOHNSON	PROPERTY LOCATION: 323 SMITH PRINCE NO (STILL) SUBDIVISION LOT #
Facility Type: 392 69'45'555 New	Expansion Repair
Basement? Yes No Basement Fixtures? Yes	□ No
	2/
(See note below, if applicable)	GPD (Initial) Wastewater Flow: 90 GPD
	/Bassis)
25% NEDEMON	
Installation Requirements/Conditions Number of trend	
·	each trench LOO feet Trench Spacing: Feet on Center
	e installed on contour at a Soil Cover:inches
	Depth of:inches (Maximum soil cover shall not exceed
•	shall be level to $\pm 1/4$ " 36" above the trench bottom)
in all directions)	* **
Pump Requirements:ft. TDH vsGPM	inches below pipe
	Aggregate Depth: inches above pipe
Conditions: GLAVITY TO D. BOX ECUAL	DISTRIBUTION NA inches total
MATER LINES (INCLUDING IRRIGATION) MUST BE 1057 FROM	NIV DADT OF CERTIC CUCTER OF DEPART AND
WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM A	
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD ARE	Α.
**If applicable: 1 understand the system type specified is different from	the type specified on the application. I accept the specifications of this permit.
0 () ()	
Owner/Legal Representative Signature:	Date:
	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 Laws and Rules for	Sewage Treatment and Disposal and to the conditions of this permit. SEE ATTACHED SITE SKETCH
Authorized State Agent:	Date: 67/62/2020
ANDREWS CURRID CONST	ruction Authorization Expiration Date: 07/02/2025

Harnett County Department of Public Health Site Sketch

Property Location: 323 SMITH PRINCE TOAS (CHRISTIAN LT NO. SMITH) Issued To: TREWT + ALLANDA JOHNSON Subdivision Date: 07/02/2020 Authorized State Agent: _ 117.21 33 22' Ď E w 4 ٢ This drawing is for illustrative purposes only. System installation must meet all pertinent laws, rules, and regulations.