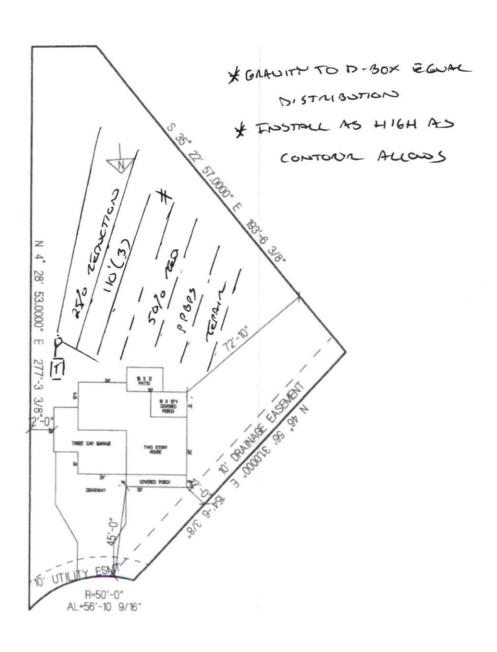
Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: 333 Oakhaven Drive (NC 42 W.) ISSUED TO: Cumberland Homes Inc. subdivision Oakhaven REPAIR EXPANSION NEW X Site Improvements required prior to Construction Authorization Issuance: Type of Structure: 66x52 sfd, 4 beds 2 baths Proposed Wastewater System Type: 25% Reduction Sys. Projected Daily Flow: 480 Number of Occupants: 8 Number of bedrooms: 4 Basement Yes No May be required based on final location and elevations of facilities Pump Required: Yes Type of Water Supply: Community Public Well Distance from well NA feet X Five years Permit valid for: No expiration Permit conditions: Authorized State Agent:: The issuance of this permit by the Health Department in no way guarantees the issuance of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This site is subject to revocation if the site plan, plat, or the intended use changes. 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 conditions of this permit. Construction Authorization (Required for Building Permit) The construction and installation requirements of Rules .1950, .1952, .1954, .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. PROPERTY LOCATION: 333 Oakhaven Drive (NC 42 W.) ISSUED TO: Cumberland Homes Inc. SUBDIVISION Oakhaven LOT # 14 Facility Type: 66x52 sfd, 4 beds 2 baths Expansion ➤ New Basement Fixtures? Yes 25% Reduction System Type of Wastewater System** (Initial) Wastewater Flow: 480 GPD (See note below, if applicable) 50% Reduction PPBPS Sys. Number of trenches Installation Requirements/Conditions Exact length of each trench __ Septic Tank Size 1000 gallons Trenches shall be installed on contour at a Soil Cover: Pump Tank Size _____ Maximum Trench Depth of: _ (Maximum soil cover shall not exceed (Trench bottoms shall be level to +/-1/4" 36" above the trench bottom) in all directions) inches below pipe Pump Requirements: _____ ft. TDH vs. inches above pipe Aggregate Depth: GRAVITY D-Box inches total WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM ANY PART OF SEPTIC SYSTEM OR REPAIR AREA. NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN 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: 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 SEE ATTACHED SITE SKETCH 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. Authorized State Agent: Construction Authorization Expiration Date: __ ANDREW

Harnett County Department of Public Health Site Sketch

Property Location: 333 Oakhaven Dr	rive (NC 42 W.)		
Issued To: Cumberland Homes Inc.	Subdivision Oakhaven		Lot # <u>14</u>
Authorized State Agent:	Million , 1045	Date:	01/24/2022
	ANDTEN CORUN		



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