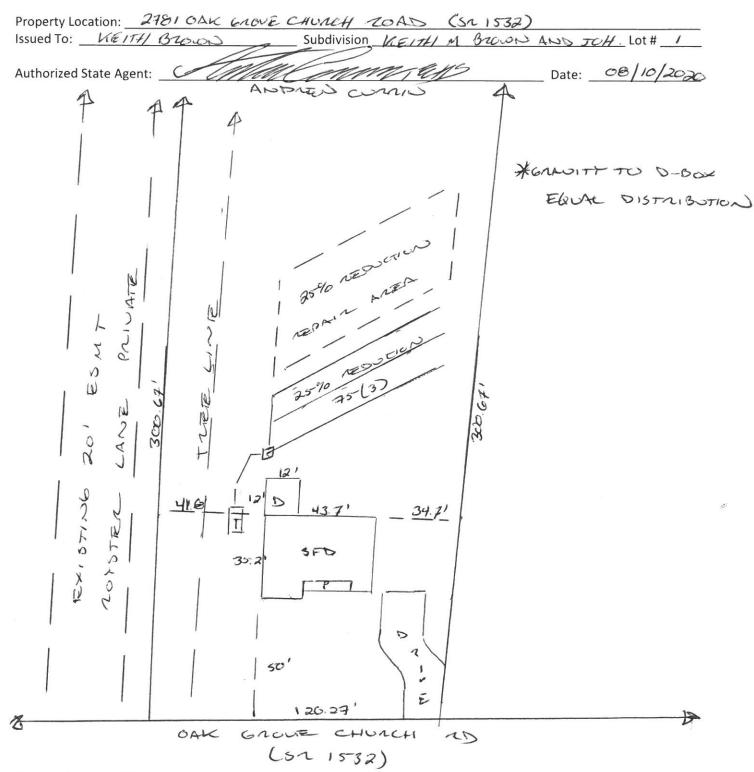
Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

ISSUED TO: MEITH Brown			K GROVE CHUNCH	
NEW REPAIR EXPANSIO			quired prior to Construction Author	
Type of Structure: 3 - GEDROCOM 441		site improvements re-	danca buot to construction watero	tration issuance.
Proposed Wastewater System Type: 25% 25%				
Projected Daily Flow: 360 GPD	3/3,			
Number of bedrooms: 3 Number of Occup	ants: 6 max			
Basement Yes No				
Pump Required: Yes Pump May be requi	red based on final location and elevat	tions of facilities		
Type of Water Supply: Community Public			Permit valid for:	Five years
Permit conditions:				No expiration
Additional of the second	- Mario	08/10/2	2	
Authorized State Agent:	Date:		JEE 7117	ACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guarar site is subject to revocation if the site plan, plat, or the intended use of the Laws and Rules for Sewage Treatment and Disposal and to condition	nanges. The Improvement Permit shall not be a	noider is responsible for che ffected by a change in owne	cking with appropriate governing bodies in riship of the site. This permit is subject to	meeting their requirements. This compliance with the provisions of
	Construction Aut	horization		
	(Required for Building			
The construction and installation requirements of Rules .1950, .1952, .19 with the attached system layout.			into this permit and shall be met. Systems	shall be installed in accordance
ISSUED TO: KEITH BZOWN	DDUDEDIA	LOCATION: 278	I CAK CAQ 2-CIL	2001115/5/5
1330ED 10. PER 17 13-2035		LUCATION.	Brown AND JOS	/ INT # /
Facility Type: 3 B1 44 x 36 350	Expansion		Duwn 4013 309	-7 LUI # _/
Basement? Yes No Basement Fixt		on L Repair		
	MEDUCTION STS	. 4	/I-1/-1\ \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	36 > 600
	MEDICINE 575	nesoc .	(Initial) Wastewater Flow:	360 GPD
(See note below, if applicable)	WOOD STSTEM	/D: \		
		(kepair)		
Installation Requirements/Conditions	Number of trenches 3		9	*
Septic Tank Size \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Exact length of each trench 3		Trench Spacing:	Feet on Center
Pump Tank Sizegallons	Trenches shall be installed on con	102		nches
	The Control of the Co	18 inches	(Maximum soil cover shall r	
	(Trench bottoms shall be level to	+/-1/4"	36" above the trench bott	om)
	in all directions)		4.0	
Pump Requirements:ft. TDH vs	GPM		NA	inches below pipe
			Aggregate Depth:	inches above pipe
Conditions: GNAVITY TO D-BC	X EGUAL DIST	-113 STE ON	<u> </u>	inches total
WATER LINES (INCLUDING IRRIGATION) MUST R	T LOST SDOW AND DADE OF SS	DTIC CVCTCIA OD D	50410 4054	
WATER LINES (INCLUDING IRRIGATION) MUST B NO UTILITIES ALLOWED IN INITIAL OR REPAIR D		PIIC SYSIEM OK R	EPAIR AREA.	
**If applicable: 1 understand the system type specified	is different from the type specified	on the application.	I accept the specifications of t	his permit.
Owner/Legal Representative Signature:			Date:	
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 Laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit. SEE ATTACHED SITE SKETCH				
and a subject to compliance with the provisions of	and noises for sewage freatment and	popusar and to the condition	ins or this permit.	MITACHED SHE SKEICH
Authorized State Agent:	Um Jun	Date:	E/10/2020 ate: E/10/2025	
ANDREW CUM	Construction Authoriz	ation Expiration Da	ate: 08/10/2025	

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.