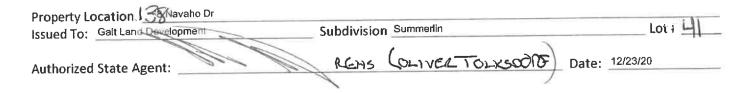
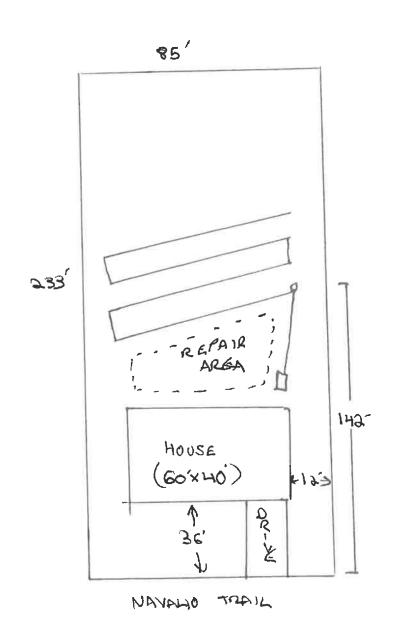
Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: 158 Navaho Dr ISSUED TO: Galt Land Development SUBDIVISION Summerlin_ Site Improvements required prior to Construction Authorization Issuance: EXPANSION | REPAIR 🔲 Type of Structure: SFD (60'x40') Proposed Wastewater System Type: 25% Reduction System Projected Daily Flow: 360 GPD Number of Occupants: 6 Number of bedrooms: 3 Basement Yes May be required based on final location and elevations of facilities Pump Required: Yes 🗵 No Type of Water Supply: Community 🗵 Public 🔲 Well Distance from well ________feet X Five years Permit valid for: ☐ No expiration Permit conditions: PC-35 Date: 12/23/20 Authorized State Agent:: The issuance of this permit by the Health Department in no way guarantees the is trace 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. ISSUED TO: Galt Land Development PROPERTY LOCATION: 168 Navaho Dr SUBDIVISION Summerlin Expansion Repair Facility Type: SFD (60'x40') ➤ New Basement Fixtures? Yes Basement? Yes X No GPD 25% Reduction System (Initial) Wastewater Flow: 360 Type of Wastewater System** (See note below, if applicable 🔲) Panel Block Number of trenches 1 Installation Requirements/Conditions Trench Spacing: 9 Feet on Center Exact length of each trench 240 Septic Tank Size 1000 gallons Soil Cover: 6_____inches Trenches shall be installed on contour at a gallons Pump Tank Size Maximum Trench Depth of: 18 inches (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. ____ Aggregate Depth: ______ inches above pipe inches total Conditions: WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM ANY PART OF SEPTIC SYSTEM OR REPAIR AREA. NO LITILITIES 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 1 make 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 23 2011 to compliance with the ision of the Laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit. Date: 12/23/20___ Authorized State Agent: ___ Construction Authorization Expiration Date: 12/23/25

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.