Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

01-1-1-1-1		old Stage Rd. S. (SR	1769)	
ISSUED TO: Charles Lewis Bayles Jr	SUBDIVISION AC Snipes		LOT # TR2	
NEW REPAIR EXPANSION Site Improvements required prior to Construction Authorization Issuance:				
Type of Structure: 58x51 sfd, 3 beds 2 baths	_			
Proposed Wastewater System Type: 25% Reduction Sys.	— (
Projected Daily Flow: 360 GPD	,			
Number of bedrooms: 3 Number of Occupants: 6	_max			
Basement Tes No				
Pump Required: Yes No May be required based on final	ocation and elevations of facilities		_	
Type of Water Supply: Community Public Well Dista	nce from well 50+ feet	Permit valid for:	▼ Five years	
Permit conditions:			No expiration	
Authorized State Agent:	200000000000000000000000000000000000000) (FF 45740)		
The issuance of this permit by the Health Department in no way guarantees the issuance of other	Date: 69/14/2	COPE SEE ATTACK	IED SITE SKETCH	
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 owners	cing with appropriate governing bodies in me thip of the site. This permit is subject to com-	eting their requirements. This	
the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.	,	The second second to sould to soul	printed with the provisions of	
Constr	uction Authorization			
(Re	quired for Building Permit)			
The construction and installation requirements of Rules 1950, 1952, 1954, 1955, 1956, 1957,	.1958. and .1959 are incorporated by references in	to this permit and shall be met. Systems sha	Il be installed in accordance	
with the attached system layout.				
ISSUED TO: Charles Lewis Bayles Jr	PROPERTY LOCATION:	Old Stage Rd. S.	(CD 1760)	
back to.	SUBDIVISION AC Snipes	Old Stage Na. S.		
Facility Type: 58x51 sfd, 3 beds 2 baths New			LOT # <u>TR2</u>	
	Expansion Repair			
	□No	W Varia day 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	-	
Type of Wastewater System** 25% Reduction System		_ (Initial) Wastewater Flow: 36	O GPD	
(See note below, if applicable)				
_25% Reduction System	()			
Installation Requirements/Conditions Number of trench				
Septic Tank Size 1000 gallons Exact length of	each trench 90 feet	Trench Spacing: 9 Fe	et on Center	
Pump Tank Sizegallons Trenches shall be	installed on contour at a	Soil Cover: 12inch	es	
Maximum Trench	Depth of: 24 inches	(Maximum soil cover shall not	exceed	
(Trench bottoms	shall be level to +/-1/4"	36" above the trench bottom		
in all directions)				
Pump Requirements:ft. TDH vsGPM		NA	inches below pipe	
		Aggregate Depth: NA	inches above pipe	
Conditions: Gravity to D-Box Equal Distribution		NA	inches total	
			miches total	
NATED LINES (INCLIDING IDDICATION) MILET DE JOET EDOM AL	IV DADT OF SERTIS SVSTEM OR DE	DAID ADEA		
WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM AI	IT PART OF SEPTIC SYSTEM OF RE	PAIK AKEA.		
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD AREA				
**If applicable: I understand the system type specified is different from t	he type specified on the application /	accent the specifications of this	permit	
, , , ,	on the appreciation i	accept the specimentons of this	perime.	
Owner/Legal Representative Signature:		Date:		
This Construction Authorization is subject to revocation if the site plan, plat, or the intended use of	hanges. The Construction Authorization shall not be		his of the vise. This	
Construction Authorization is subject to compliance with the provisions of the Laws and Rules for S	ewage Treatment and Disposal and to the conditions	of this nermit CFF ATT	ACHED SITE SKETCH	
	o	JEE ATT	SELED SHE SKEICH	
Authorized State Agents College Colleg		-01.11/2-		
Authorized State Agent:	Date: _	09/14/2020	-	
ANDRES CURIN Constr	uction Authorization Expiration Date	e: 09/14/3020	5	

Harnett County Department of Public Health Site Sketch

Property Locat			
Issued To: Cha	arles Lewis Bayles Jr	Subdivision AC Snipes	Lot # TR2
Authorized Sta	ate Agent:	Minn Cent	Date:e9/14/2020
Authorized Sta	Daive	8/1 SELL ANEA ** PROPOSED ST ST ST ST ST ST ST S	Date: eq/14/2020 EQUAL DISTRIBUTION STS. FLAGGED CNSITE
(U)	. FENCE LI	NE NE	
	A TOTAL CI		
This drawing is	for illustrative purposes only	. System installation must meet all pertine	nt laws, rules, and regulations.
/ /			•
/ /			
ø Ø		*	