Harnett County Department of Public Health

Improvement Permit A building permit cannot be issued with only an Improvement Permit

A bunding permit cann	PROPERTY LOCATION: 3331 BAILET XIDS NO (SN 1581)
	SUBDIVISION VICKIZ WOOD ZUNIS LOT # 7
NEW ★ REPAIR EXPANSION	Site Improvements required prior to Construction Authorization Issuance:
Type of Structure: 44 BEDICON 72'x45' 5=5	
Proposed Wastewater System Type: 25% RESERVED SS.	
Projected Daily Flow: 480 GPD	
Number of bedrooms: 4 Number of Occupants: 8	max
Basement Tes No	
Pump Required: Yes No May be required based on final lo	
Type of Water Supply: Community 🖊 Public 🗌 Well Distance	
Permit conditions:	No expiration
12	
Authorized State Agent:: (12) (111111111111111111111111111111111	Date: 40/01/2020 SEE ATTACHED SITE SKETCH
	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 I	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.	
Constru	uction Authorization
(Req.	uired for Building Permit)
	.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: WOODS MEDIDENTAL BLOS	PROPERTY LOCATION: 333/ BAILET XADS AD (SLISTED)
	SUBDIVISION VICKIE WOODS ENWIS LOT # 7
Facility Type: 4B1 78'x45' 5555 New	☐ Expansion ☐ Repair
Basement? Yes No Basement Fixtures? Yes	□ No
NAME OF THE PARTY	STOTEM (Initial) Wastewater Flow: YEO GPD
	dilitial wastewater flow.
(See note below, if applicable [])	The state of the s
25% NEDXERON ST	
	ies 3
	ach trench
	installed on contour at a Soil Cover:inches
Maximum Trench	
(Trench bottoms s	shall be level to +/-1/4" 36" above the trench bottom)
in all directions)	
Pump Requirements:ft. TDH vsGPM	inches below pipe
	Aggregate Depth: inches above pipe
Conditions: GRAVITY TO D. BEN EGUAL	DI STRIBUTION NA inches total
WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM AN	NY PART OF SEPTIC SYSTEM OR REPAIR ARFA
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD AREA	
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD AREA	l.
**If applicable: I understand the system type specified is different from to	he type specified on the application. I accept the specifications of this permit.
Owner/Legal Representative Signature:	Date:
	hanges. 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 S	ewage Treatment and Disposal and to the conditions of this permit. SEE ATTACHED SITE SKETCH
Authorized State Agent:	uction Authorization Expiration Date: 10/01/2020
Constr	auction Authorization Expiration Date: 16/01/2025
COURT	The state of the s

Harnett County Department of Public Health Site Sketch

