Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

PROPERTY LOCATION 1809 Joneshou

ISSUED TO: Donald & Dawn Glover	SUBDIVISION Donald Ray Glover Lot # 1
NEW REPAIR EXPANSION	Site Improvements required prior to Construction Authorization Issuance:
Type of Structure: 98'x55' 2-Bedroom SFD	
Proposed Wastewater System Type: Conventional Gravel	
Projected Daily Flow: 240 GPD	
Number of bedrooms: 2 Number of Occupants: 4	max
Basement Yes No	
	nal location and elevations of facilities
Type of Water Supply: Community Public Well D	istance from well NA feet Permit valid for: Five years No expiration
111	
5 Home	2000
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.	
Con	struction Authorization
	(Required for Building Permit)
The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, . with the attached system layout.	1957, 1958, and 1959 are incorporated by references into this permit and shall be met. Systems shall be installed in accordance
ISSUED TO: Donald & Dawn Glover	PROPERTY LOCATION: 1809 Jonesboro Road (SR 1808)
	SUBDIVISION Donald Ray Glover LOT # 1
Facility Type: 98'x55' 2-Bedroom SFD Ne	w Expansion Repair
Basement? Yes No Basement Fixtures? Yes	□No
Type of Wastewater System** Conventional Gravel	/ 25% Reduction (Initial) Wastewater Flow: 240 GPD
(See note below, if applicable)	
Conventional (Pump)(Repair)
Installation Requirements/Conditions Number of tr	enches 3
	of each trench 90 feet Trench Spacing: 9 Feet on Center
	l be installed on contour at a Soil Cover: 8 inches
•	nch Depth of: 20 inches (Maximum soil cover shall not exceed
	ms shall be level to $\pm 1/4$ " 36" above the trench bottom)
in all direction	
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
	Incles total
WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD A	
**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:	Date:
	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.	
Authorized State Agent: Date: 10/16/2020	
	nstruction Authorization Expiration Date: 10/16/2025
ANDREW CULLIA 10	The state of the s

Harnett County Department of Public Health Site Sketch

