Harnett County Department of Public Health

Improvement Permit

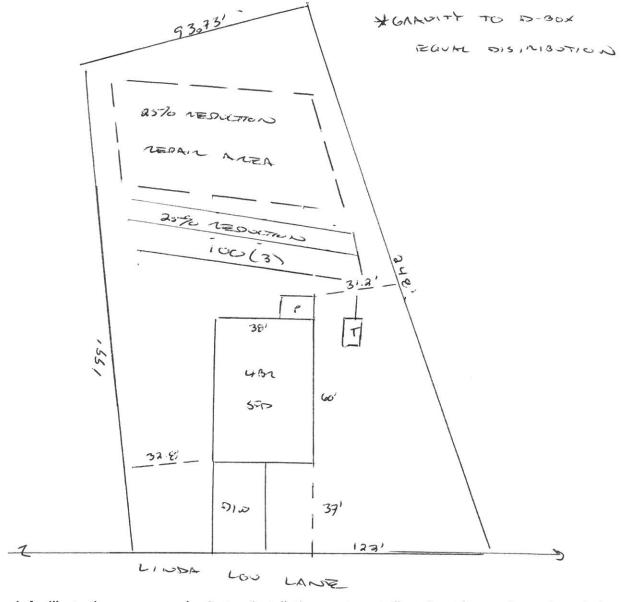
A building permit can	PROPERTY LOCATION: 47 LINDA LOS LAS. (MITCHELL 7CAS)
ISSUED TO: A+6 NZOIDENTIAL	SUBDIVISION MITCHELL ROAS LOT # 20
NEW ₹ REPAIR EXPANSION	Site Improvements required prior to Construction Authorization Issuance:
Type of Structure: 4-BEDREON CO'x 36'555	
Proposed Wastewater System Type: 25% NEDICTION 5:3	<u>\$.</u>
Projected Daily Flow: 486 GPD	
Number of bedrooms: Number of Occupants:	max
Basement 🔲 Yes 🖊 No	
Pump Required: Yes No May be required based on final	
Type of Water Supply: Community Public Well Dista	
Permit conditions:	No expiration
	Date: 1/104/2020 SEE ATTACHED SITE SKETCH
	her permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This
the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.	nt Permit shall not be affected by a change in ownership of the site. This permit is subject to compliance with the provisions of
The state of the s	
Consti	ruction Authorization
	equired for Building Permit)
	17, 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.	521535
ISSUED TO: A+G MRE, NEWTINE	PROPERTY LOCATION: 47 LINGSA LOW CN. (MITCHELL RA
1330ED 10. 14.16 100 11.	SUBDIVISION MITCHIELL 10AD LOT # 20
Facility Type: 432 60'x38' 575 New	_
- 1987 -	
	ONO (Initial) Wastewater Flow: 486 GPD
	(Initial) Wastewater Flow: 486 GPD
(See note below, if applicable)	3 326 (Bassis)
	ϵ
	each trench
,	*711
Maximum Trench	There's (Haximum son cover shan not exceed
in all directions)	^
Pump Requirements:ft. TDH vsGPM	inches below pipe
	Aggregate Depth: inches above pipe
Conditions: CAPUITY TO D-BOX EL	UNL DISTRIBUTION Inches total
WATER LINES (INCLUDING IRRIGATION) MALIST RE 10ET FROM A	ANV DADT OF CERTIC CVCTEM OR DEDAID AREA
WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM A	
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD ARE	cA.
**If applicable: 1 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:
This Construction Authorization is subject to revocation if the site plan, plat, or the intended use	e 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	r Sewage Treatment and Disposal and to the conditions of this permit. SEE ATTACHED SITE SKETCH
Authorized State Agent:	Struction Authorization Expiration Date: 11/04/2025
ANDREW COMO CONS	struction Authorization Expiration Date: 11/04/2075

Harnett County Department of Public Health Site Sketch

Property Location: 42 LINDA LGO LAND (MITCHELL NOAD -57 1535-)

Issued To: A+G 123 1D ENTINE Subdivision MITCHELL NOAD Lot # 20

Authorized State Agent: Date: 11/04/2020



This drawing is for illustrative purposes only. System installation must meet all pertinent laws, rules, and regulations.