Harnett County Department of Public Health

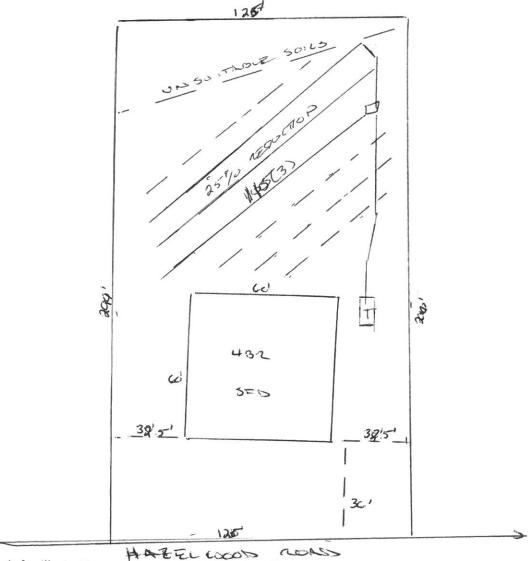
Improvement Permit

SUBDIVISION Size Improvements required prior to Construction Authorization Issuance:	A Duilding permit cannot be issued with	1001/2 A HAZELWON EN (NEIKS CNC RD)
REPAIR EXPANSION Site Improvements required prior to Construction Authorization Issuance: Proposed Wastewater System Type:		
Type of Structure:		
Projected Daily Flow: YES GPD Number of bedrooms: Yes Number of Occupants: Yes May be required based on final location and elevations of facilities Spreament Pes No May be required based on final location and elevations of facilities Permit conditions: Public Well Distance from well No expiration Number of bedrooms: See ATTACHED SITE SKETCH No expiration No expiration Number of State Agent: See ATTACHED SITE SKETCH No expiration No expiration No expiration Number of State Agent: See ATTACHED SITE SKETCH No expiration No expiration No expiration Number of State Agent: See ATTACHED SITE SKETCH No expiration No expiration Number of State Agent: See ATTACHED SITE SKETCH No expiration No expiration Number of State Agent: See ATTACHED SITE SKETCH No expiration No expiration Number of State Agent: See ATTACHED SITE SKETCH No expiration No expiration Number of State Agent: See ATTACHED SITE SKETCH No expiration No expiration Number of State Agent: See ATTACHED SITE SKETCH No expiration No expiration Number of State Agent: See ATTACHED SITE SKETCH No expiration No expiration Number of State Agent: See ATTACHED SITE SKETCH No expiration No		
Number of bedrooms: Number of Occupants:	Proposed Wastewater System Type: 25% 15000000 575 .	
Basement cross-continued State Agent: No No expiration		
Permit conditions: Permit valid for: Size years	Number of bedrooms: Number of Occupants: & max	
Permit conditions: Public Well Distance from well	Basement 🔲 Yes 🔼 <u>No</u>	
Permit conditions: Date:	Pump Required: Yes No May be required based on final location and elevat	ions of facilities
Authorized State Agent: Date: 1 1 2020 SEE ATTACHED SITE SKETCH		
Lonstruction Authorization (Required for Building Permit) (SUBDITO: SICNATURE HOME BLOSS PROPERTY LOCATION: 70 HAZRINGOL IN (DEFUS CALL ROSSUBLITION) (SUBDITISTION Basement Fixtures? Yes No (Initial) Wastewater Flow: 420 gallons (Requirements/Conditions Number of trenches 3 Exact length of each trench 115 feet Trench Spacing: 9 Feet on Center Jersche bottom) in all directions) in all directions) ump Requirements: 16th the site plan, plat, or the intended use changes in the istance of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This is a subject to compliance with the provisions of the leaves and Rules for Sewage Treatment and Obspace of the site Provisions of	Permit conditions:	No expiration
Lonstruction Authorization (Required for Building Permit) (SUBDITO: SICNATURE HOME BLOSS PROPERTY LOCATION: 70 HAZRINGOL IN (DEFUS CALL ROSSUBLITION) (SUBDITISTION Basement Fixtures? Yes No (Initial) Wastewater Flow: 420 gallons (Requirements/Conditions Number of trenches 3 Exact length of each trench 115 feet Trench Spacing: 9 Feet on Center Jersche bottom) in all directions) in all directions) ump Requirements: 16th the site plan, plat, or the intended use changes in the istance of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This is a subject to compliance with the provisions of the leaves and Rules for Sewage Treatment and Obspace of the site Provisions of	11	
Lonstruction Authorization (Required for Building Permit) (SUBDITO: SICNATURE HOME BLOSS PROPERTY LOCATION: 70 HAZRINGOLUS CALL AS SUBDIVISION S	Authorized State Agents ()	11 1 2 2 2 2 2 CET LETTER CATE CHEEKING
Construction Authorization Required for Building Permit		
Required for Building Permit	site is subject to revocation if the site plan, plat, or the intended use changes. The Improvement Permit shall not be af the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.	fected by a change in ownership of the site. This permit is subject to compliance with the provisions of
he construction and installation requirements of Rules 1950, 1952, 1954, 1955, 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. SUBDIVISION SOUTH CARROLL IN (NETILLS CALL AND SUBDIVISION SU	Construction Aut	horization
PROPERTY LOCATION: For HAZILLA LINE 1950, 19	(Required for Buildin	g Permit)
PROPERTY LOCATION: 70 HAZZURED IN (DEPLIS CALL AS) SUBDIVISION SOUTH CAREFORM LOT # 76 IN PROPERTY LOCATION: 70 HAZZURED IN (DEPLIS CALL AS) SUBDIVISION SOUTH CAREFORM LOT # 76 IN PROPERTY LOCATION: 70 HAZZURED IN (DEPLIS CALL AS) SUBDIVISION SOUTH CAREFORM LOT # 76 Initial) Wastewater Flow: 480 GPD GPD SUBDIVISION SOUTH CAREFORM LOT # 76 Initial) Wastewater Flow: 480 GPD GPD SUBDIVISION SOUTH CAREFORM LOT # 76 Initial) Wastewater Flow: 480 GPD GPD GPD SUBDIVISION SOUTH CAREFORM LOT # 76 Initial) Wastewater Flow: 480 GPD GPD GPD SUBDIVISION SOUTH CAREFORM LOT # 76 Initial) Wastewater Flow: 480 GPD GPD GPD GPD SUBDIVISION SOUTH CAREFORM LOT # 76 Initial) Wastewater Flow: 480 GPD GPD GPD GPD SUBDIVISION SOUTH CAREFORM LOT # 76 Initial) Wastewater Flow: 480 GPD GPD GPD SUBDIVISION SOUTH CAREFORM LOT # 76 Initial) Wastewater Flow: 480 GPD GPD GPD GPD SUBDIVISION SOUTH CAREFORM LOT # 76 Initial) Wastewater Flow: 480 GPD GPD GPD GPD SUBDIVISION SOUTH CAREFORM LOT # 76 Initial) Wastewater Flow: 480 GPD GPD GPD GPD GPD GPD GPD GPD	The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .1957, .1958, and .1959 are with the attached system layout.	
Accepting to the content of the co		LOCATION: 70 HAZELLOCOD IN (WEILLS CAK as)
Yes No Basement Fixtures? Yes No No No No No No No N	the same and the s	
See note below, if applicable See note below See note below, if applicable See note below See note below, if applicable See note below See note below See note below, if applicable See note below See note		on L. Repair
See note below, if applicable		
Number of trenches 3		(Initial) Wastewater Flow: 480 GPD
Number of trenches 3 eptic Tank Size 1000 gallons ump Tank Size gallons Trenches shall be installed on contour at a Maximum Trench Depth of: 100 inches (Trench bottoms shall be level to +/-1/4" 36" above the trench bottom) in all directions) ump Requirements: ft. TDH vs. GPM Number of trenches 3 Exact length of each trench 115 feet Trench Spacing: 7 Feet on Center Soil Cover: 6 inches (Maximum soil cover shall not exceed 36" above the trench bottom) in all directions) Aggregate Depth: Aggregate Depth: Aggregate Depth: nches above pipe		
eptic Tank Size	-50/0 RESULTION PROPS	(Repair)
ump Tank Sizegallons		_
ump Tank Sizegallons	Septic Tank Size 1000 gallons Exact length of each trench	115 feet Trench Spacing: 9 Feet on Center
(Trench bottoms shall be level to +/-1/4" 36" above the trench bottom) in all directions) ump Requirements:ft. TDH vsGPM Aggregate Depth:A inches below pipe inches above pipe	Pump Tank Sizegallons Trenches shall be installed on con	
(Trench bottoms shall be level to +/-1/4" 36" above the trench bottom) in all directions) ump Requirements:ft. TDH vsGPM Aggregate Depth:A inches below pipe inches above pipe	Maximum Trench Depth of:	16 inches (Maximum soil cover shall not exceed
in all directions) ump Requirements:ft. TDH vsGPM Aggregate Depth:A inches below pipe inches above pipe		No. of the state o
ump Requirements:ft. TDH vsGPMAggregate Depth:Ainches below pipe inches above pipe		
Aggregate Depth: inches above pipe		A inches below nine
mones total	Conditions: GRAVITY TO D-BOX FRUAR DISTA	
	20070 7.3770	inches total
ATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM ANY PART OF SEPTIC SYSTEM OR REPAIR AREA. O UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD AREA.	WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM ANY PART OF SEI NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD AREA.	PTIC SYSTEM OR REPAIR 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.	**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:	
is Construction Authorization is subject to revocation if the site 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		
nstruction 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.	Construction Authorization is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and I	Disposal and to the conditions of this permit. SEE ATTACHED SITE SKETCH
		The second secon
uthorized State Agent:	Authorized State Agent:	Date:11/10/2020
ANSTEN CORRING Construction Authorization Expiration Date: 11/10/2025		

Harnett County Department of Public Health Site Sketch

Property Location: 70 HAZEL WOOD LW. CHEILL	5 CRIC ND -521513	
Issued To: SICNATURE HEME BLAS Subdivision	SOUTH CREEK	Lot #_70
Authorized State Agent:		11/10/ 2020

* GRAVITY TO D-BOX EGUAL DISTRIBUTION



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