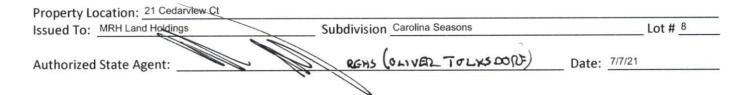
Harnett County Department of Public Health

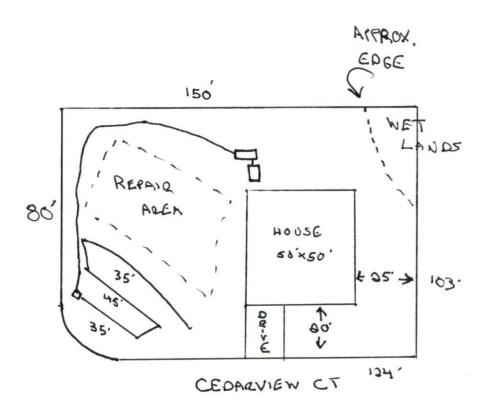
Improvement Permit

A building permit cannot be issued with only an Improvement Permit

	PROPERTY LOCATION: 21 CEUA		
ISSUED TO: MRH Land Holdings	subdivision Carolina Sea	sons	LOT # 8
NEW REPAIR EXPANSION	Site Improvements re	quired prior to Construction Authoriza	tion Issuance:
Type of Structure: SFD (50'x50')			
Proposed Wastewater System Type: Pump to 25% Re	duction		
	duction		
Number of bedrooms: 3 Number of Occupants: 6	max		
Basement Yes No			
	d on final location and elevations of facilities	To be sented	
Type of Water Supply: Community Public W	ell Distance from well feet	Permit valid for:	▼ Five years
Permit conditions:			No expiration
Authorized State Agent::	ens Date: 7/7/21	SEE ATTAC	HED SITE SKETCH
The issuance of this permit by the Health Department in no way guarantees the is			
site is subject to revocation if the site plan, plat, or the intended use changes. The			
the Laws and Rules for Sewage Treatment and Disposal and to conditions of this p			
	Construction Authorization		
	Construction Authorization		
	(Required for Building Permit)		
The construction and installation requirements of Rules .1950, .1952, .1954, .1955		s into this permit and shall be met. Systems sh	all be installed in accordance
with the attached system layout.	3		
And the second s			
ISSUED TO: MRH Land Holdings	PROPERTY LOCATION: 21 C	Cedarview Ct	
	SUBDIVISION Carolina S	Seasons	LOT # 8
Facility Type: SFD (50'x50')	New □ Expansion □ Repair		
	The state of the s		
Basement? Yes No Basement Fixtures?			managani managani
Type of Wastewater System** Pump to 25% Re	duction System	(Initial) Wastewater Flow: 3	60 GPD
(See note below, if applicable)			
Pump to 25% R	ed(Repair)		
	er of trenches 1		
Septic Tank Size 1000 gallons Exact	length of each trench 115 feet	Trench Spacing: 9	eet on Center
Pump Tank Size 1000 gallons Trench	es shall be installed on contour at a	Soil Cover: 12inc	thes :
	um Trench Depth of: 24inches	(Maximum soil cover shall no	t exceed
	h bottoms shall be level to +/-1/4"	36" above the trench botton	
		30 above the trench botton	11)
in all	directions)		
Pump Requirements: ft. TDH vsGPM			inches below pipe
		Aggregate Depth:	inches above pipe
Conditions:			inches total
Conditions:			menes total
WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT		RFPΔIR ΔRFΔ	
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN F	. FROM ANY PART OF SEPTIC SYSTEM OR		
NO DITEILES ALLOWED IN INITIAL OF RELAIN DRAIN I		RETAIN AREA.	
		NEI AIN AINEA.	
**If applicable: I understand the system type specified is diffe	IELD AREA.		is permit.
**If applicable: 1 understand the system type specified is diffe	IELD AREA.		is permit.
	IELD AREA.	n. I accept the specifications of th	is permit.
Owner/Legal Representative Signature:	IELD AREA. rent from the type specified on the application	n. I accept the specifications of the Date:	
Owner/Legal Representative Signature: This Construction Authorization is subject to revocation if the site plan, plat, or the	IELD AREA. rent from the type specified on the application intended use changes. The Construction Authorization shall no	n. I accept the specifications of the Date: t be transferred when there is a change in own	ership of the site. This
Owner/Legal Representative Signature:	IELD AREA. rent from the type specified on the application intended use changes. The Construction Authorization shall no	n. I accept the specifications of the Date: t be transferred when there is a change in own	
Owner/Legal Representative Signature: This Construction Authorization is subject to revocation if the site plan, plat, or the	IELD AREA. rent from the type specified on the application intended use changes. The Construction Authorization shall no	n. I accept the specifications of the Date: t be transferred when there is a change in own	ership of the site. This
Owner/Legal Representative Signature: This Construction Authorization is Subject to revocation if the site plan, plat, or the Construction Authorization is Subject to compliance with the provisions of the Laws	IELD AREA. rent from the type specified on the application intended use changes. The Construction Authorization shall no and Rules for Sewage Treatment and Disposal and to the cond	Date: t be transferred when there is a change in own SEE A	ership of the site. This
Owner/Legal Representative Signature: This Construction Authorization is subject to revocation if the site plan, plat, or the	IELD AREA. rent from the type specified on the application intended use changes. The Construction Authorization shall no and Rules for Sewage Treatment and Disposal and to the cond	Date: t be transferred when there is a change in own titions of this permit. 7/7/21	ership of the site. This

Harnett County Department of Public Health Site Sketch





SOUTHEASTERN SOIL & ENVIRONMENTAL ASSOC., INC.

PROPOSED SUBSURFACE WASTE DISPOSAL SYSTEM DETAIL SHEET

	SUBDIVISION: CAROUNA SEASONS			LOT 8	
	INITIAL SYSTEM: APPROVED 25% REDUCTION			REPAIR APPROVED 25 1. DEPUCTION	
	DISTRIBUTION: SERIAL			DISTRIBUTION SERIAL	
	BENCHMARK	: 100.0		LOCATION FC CEPAPULEW F. H	
	NO. BEDROOMS: 3			LTAR 0,85PD/FT INITIAL 0,65PD/FT MEAAIN	
	LINE	FLAG COLOR	ELEVATION	LENGTH NEADON	
	1	В	191.08	35'	
المرا	72	y	100,50	45'	
Intil 343km	C3A	В	99.67	35'	
543				115'	
	3 <i>B</i>	В	99.67	2,5 '	
	4	Y	98.34	11,	
	_5	B	96.84	60'	
	6	7	96.00	25'	

	RV MF	W/SA		DATE	
	TYPICAL PROFILE (1~ 1TIM)			DATE 07/	
				THERE SHALL BE NO GRADING,	
	0-48	isled VF, ugs)		CUTTING, LOGGING OR OTHER SOIL	
				DISTURBANCE IN SEPTIC AREA	
				HEALTH DEPARTMENT USE ONLY.	
				DESIGNS DO NOT GURANTEE FUNCTIONALITY	

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