Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: 47 Cedaeview Ct. Cameron ISSUED TO: MRH Land Holding SUBDIVISION Carolina Seasons EXPANSION 🔲 REPAIR 🗍 Site Improvements required prior to Construction Authorization Issuance: NEW 🔀 Type of Structure: SFR Proposed Wastewater System Type: Pump to 50% reduction Projected Daily Flow: 360 Number of Occupants: 6 Number of bedrooms: 3_ × No Basement Yes May be required based on final location and elevations of facilities ☐ No Pump Required: XYes Type of Water Supply: Community Dublic Well Distance from well _______feet Permit valid for: X Five years No expiration Permit conditions: PPB to be used Date: 12-01-2020 SEE ATTACHED SITE SKETCH 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. Construction Authorization (Required for Building Permit) The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .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. ISSUED TO: MRH Land Holding PROPERTY LOCATION: 47 Cedarview Ct. Cameron SUBDIVISION Carolina Seasons Expansion Repair Facility Type: SFR ✓ New Basement Fixtures? Yes Basement? Yes Pump to 50% reduction (Initial) Wastewater Flow: 360 GPD Type of Wastewater System** (See note below, if applicable) Pump tp 50% reduction Number of trenches 3 Installation Requirements/Conditions Trench Spacing: 9 Exact length of each trench 40 Feet on Center Septic Tank Size 1000 Trenches shall be installed on contour at a Soil Cover: 6 inches Pump Tank Size 1000 gallons (Maximum soil cover shall not exceed Maximum Trench Depth of: 18-26 _inches (Trench bottoms shall be level to +/-1/4" 36" above the trench bottom) in all directions) inches below pipe Pump Requirements: ______ft. TDH vs. _ Aggregate Depth: Conditions: Repair will be (2) 60'x3' trenches 18"-24' "PPB to be used" WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM ANY PART OF SEPTIC SYSTEM OR REPAIR AREA. NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD 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. Owner/Legal Representative Signature: This 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 SEE ATTACHED SITE SKETCH 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: The Con DEHS Date: 12-01-2020 Construction Authorization Expiration Date: 12-01-25

Harnett County Department of Public Health Site Sketch

Issued To: MRH Land Holding	Subdivision Carolina Seasons		Lot # <u>7</u>
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This drawing is for illustrative purposes only. System installation must meet all pertinent laws, rules, and regulations.