Harnett County Department of Public Health

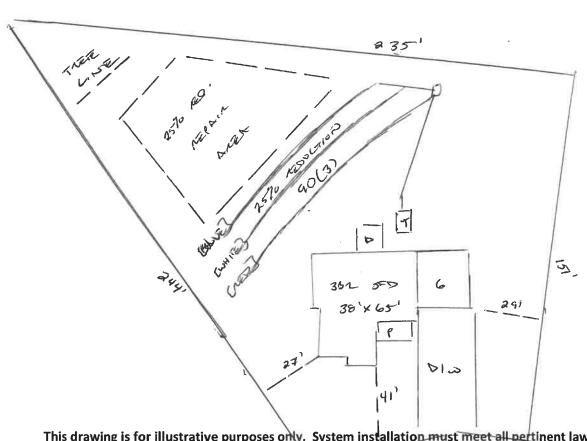
Improvement Permit A building permit cannot be issued with only an Improvement Permit

A building perior cam	PROPERTY LOCATION: 102 LILYANNE CW . (CRAWFORD RD)						
ISSUED TO: CAAIG MATTHEWS MEXCLIFY	SUBDIVISION DENISE C NATTHEWS LOT # 6						
NEW REPAIR ☐ EXPANSION ☐	Site Improvements required prior to Construction Authorization Issuance:						
Type of Structure: 3-8=070000 38'X65' 500							
Proposed Wastewater System Type: 25% MEDICTION 5	rg / -						
Projected Daily Flow: 366 GPD							
	_max						
Basement Tes A-No							
Pump Required: Yes No May be required based on final to							
Type of Water Supply: Community Public Well Distan							
Permit conditions:	No expiration						
Authorized State Agent::	Date: 11 20/2020 SEE ATTACHED SITE SKETCH						
The issuance of this permit by the Health Department in no way guarantees the issuance of other	r permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This						
	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.,							
C	and the Araba Carata						
Constr	uction Authorization						
(Reg	uired for Building Permit)						
	.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: CRAIG MATTHEWS TELLITY	PROPERTY LOCATION: 102 LILYANNE LN. (CRAWFORD TA)						
	SUBDIVISION DIENISE C. MATTHEWS LOT # 6						
Facility Type: 3-32 38'x 65' 555	Expansion Repair						
Basement? Yes No Basement Fixtures? Yes	□ No						
_ /_	(Initial) Wastewater Flow: 360 GPD						
(See note below, if applicable)	21780 3137 (IIIIIIai) Wastewater flow Or D						
25%/200010 575	(Poppir)						
Installation Requirements/Conditions Number of trench							
Septic Tank Size 1000 gallons Exact length of e	· · ·						
,							
Maximum Trench	·						
•	shall be level to $\pm 1/4$ " 36" above the trench bottom)						
in all directions)							
Pump Requirements:ft. TDH vsGPM	inches below pipe						
	Aggregate Depth: inches above pipe						
Conditions: GNAWITH TO D-BOX FEBUAL	DISTRIBUTION M inches total						
WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM AI	NY PART OF SEPTIC SYSTEM OR REPAIR AREA.						
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD AREA							
**If applicable: 1 understand the system type specified is different from t	the type specified on the application. I accept the specifications of this permit.						
Owner/Legal Representative Signature:	Date:						
	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.							
	a-lendo						
Authorized State Agent: Date: 11 20/2026							
	ruction Authorization Evolution Date: 11/20/2025						

Harnett County Department of Public Health Site Sketch

Property Lo	cation:	102 LIL	tanne u	o (CRAW	FOOD MEANS		
Issued To:	C1416	MATTHENS	TELLIT	Subdivision _	DENISE C. MATTY	Euß	Lot # <u>6</u>
Authorized	State Age	ent:	A	100 mg 10	Jamilanes Survis	Date:	11/20/2020

* GRADITY TO 6-BOX ECUAL DISTRIBUTION * SIS, FLAGGED ONSITE



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