## Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only an Improvement Permit	52 1418
	NEST Dr. (MUER MS)
ISSUED TO: NC COSTON HOMES SUBDIVISION TECHE CAR	
	to Construction Authorization Issuance:
Type of Structure: 4-BEDROOM CG'XBO'55-0 Proposed Wastewater System Type: 25% NEOSCION STS.	
Proposed Wastewater System Type: 25% 1200000 STS.  Projected Daily Flow: 486 GPD	
Number of bedrooms: Number of Occupants: & max	
Basement Yes A No	
Pump Required: Yes No May be required based on final location and elevations of facilities	
Type of Water Supply: Community Public Well Distance from well A feet	Permit valid for: Five years
Permit conditions:	No expiration
Autorial for Association of the Control of the Cont	CEE ATTACHED CITE CALLCIN
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 the interval of the permit holder is responsible for checking with appropriate the interval of the permit holder is responsible for checking with appropriate the interval of the permit holder is responsible for checking with appropriate the interval of the permit holder is responsible for checking with appropriate the permit holder is responsible for checking with appropriate the permit holder is responsible for checking with appropriate the permit holder is responsible for checking with appropriate the permit holder is responsible for checking with appropriate the permit holder is responsible for checking with appropriate the permit holder is responsible for checking with appropriate the permit holder is responsible for checking with appropriate the permit holder is responsible for checking with appropriate the permit holder is responsible for checking with appropriate the permit holder is responsible for checking with appropriate the permit holder is responsible for checking with appropriate the permit holder is responsible for checking with appropriate the permit holder is responsible for checking with a permit holder is responsible for checking	SEE ATTACHED SITE SKETCH
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 sit	
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	t and shall be met. Systems shall be installed in accordance
with the attached system layout.	541418
ISSUED TO: NC COSTON HOMES PROPERTY LOCATION: 228 NEGAL	CLEST DR. (NUER RD)
SUBDIVISION RECAL CAN	
Facility Type: 4-32 66'x80' 5 New Expansion Repair	LUI # _/
Basement? Yes No Basement Fixtures? Yes No	
	Wasternates Flows UPA CDD
(See note below, if applicable )	) Wastewater Flow:GPD
0	
Installation Requirements/Conditions  Number of trenches 4	
	acing: Feet on Center
	reet on center
	um soil cover shall not exceed
and the second s	bove the trench bottom)
in all directions)	bove the trench bottom)
Pump Requirements:ft. TDH vsGPM	0 10 inches below size
Aggregate	nches below pipe
Conditions: GNAVITY TO D-BOX EGUAR OISTAIDSTION	e Depth:inches above pipe
Conditions.	Inches total
WATER LINES (INCLUDING INDICATION) WHIST RE JOST FROM ANY DART OF SERVICE SYSTEM OR REPAIR AN	F.1
WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM ANY PART OF SEPTIC SYSTEM OR REPAIR AR	tA.
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD AREA.	
**If applicable: 1 understand the system type specified is different from the type specified on the application. I accept to	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 changes. The Construction Authorization shall not be transferred w	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 permitted in the conditions of the 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 permitted in the conditions of the Construction and Constructio	nit. SEE ATTACHED SITE SKETCH
	U I
Authorized State Agent: Date: Date: Date:	
ANDREW CONALD Construction Authorization Expiration Date:	54115/2026
Construction Administration Date.	

## Harnett County Department of Public Health Site Sketch

