Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: 1504 Gregory Circle (SR 1521) ISSUED TO: Signature Home Blds SUBDIVISION EXPANSION REPAIR Site Improvements required prior to Construction Authorization Issuance: Type of Structure: 70x65 sfd, 4 beds 3 baths Proposed Wastewater System Type: 25% Reduction Sys. Projected Daily Flow: 480 GPD Number of Occupants: 8 Number of bedrooms: 4 Basement Yes Pump Required: Yes May be required based on final location and elevations of facilities X No Type of Water Supply: Community Public Well Distance from well NA feet X Five years Permit valid for: ■ No expiration Permit conditions: Authorized State Agent:: Date: 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. PROPERTY LOCATION: 1504 Gregory Circle (SR 1521) ISSUED TO: Signature Home Blds SUBDIVISION Facility Type: 70x65 sfd, 4 beds 3 baths Expansion Basement Fixtures? Yes Basement? Yes 25% VEDUTION (Initial) Wastewater Flow: 486 Type of Wastewater System** (See note below, if applicable) 25% TENUTION STOTEM (Repair) Number of trenches 3 Installation Requirements/Conditions Trench Spacing: Septic Tank Size 1250 gallons Exact length of each trench Pump Tank Size Trenches shall be installed on contour at a Soil Cover: ___ Maximum Trench Depth of: (Maximum soil cover shall not exceed 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. __ __ inches above pipe inches total GLAUITY TO D-BOX FEWER DISTRIBUTE 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: Construction Authorization Expiration Date: 65/27/2006 AUDIEN CUMIN

Harnett County Department of Public Health Site Sketch

