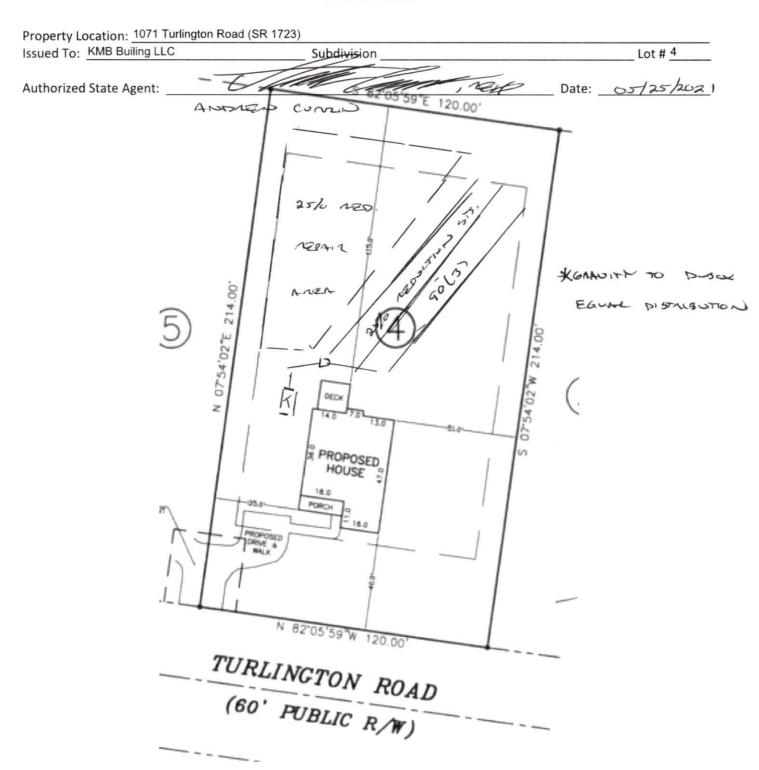
Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

IVAD D. II-II I I O	Turnington Road (SK 1725)
record to the second se	LOT # 4
NEW REPAIR EXPANSION Site Improvem Type of Structure: 36x49 sfd, 3 beds 2 baths	ients required prior to construction authorization issuance.
Proposed Wastewater System Type: 25% Reduction System	
Projected Daily Flow: 360 GPD	
Number of bedrooms: 3 Number of Occupants: 6 max	
Basement Yes No	
Pump Required: Wes No May be required based on final location and elevations of facilities	25
	eet Permit valid for: 🔀 Five years
A Comment	
Authorized State Agent:: Date: OS/;	25/262) SEE ATTACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guarantees the issuance of other permits. The permit holder is responsib 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	
the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.	1
Construction Authorization	on .
(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: KMB Building LLC PROPERTY LOCATION: 1	1071 Turlington Road (SR 1723)
SUBDIVISION	LOT # 4
	Repair
Basement? Yes No Basement Fixtures? Yes No	перап
Type of Wastewater System** 25% Reduction System	(laisiel) Wassesser Flam 360
	(Initial) Wastewater Flow: 360 GPD
(See note below, if applicable)	
Pump to 25% Reduction Sys. (Repair)	
Installation Requirements/Conditions Number of trenches 3	
Septic Tank Size 1000 gallons Exact length of each trench 90	_feet Trench Spacing: 9 Feet on Center
Pump Tank Sizegallons Trenches shall be installed on contour at a	Soil Cover: 12inches
	inches (Maximum soil cover shall not exceed
(Trench bottoms shall be level to $\pm 1/4$ "	36" above the trench bottom)
in all directions)	
Pump Requirements:ft. TDH vsGPM	NA inches below pipe
	Aggregate Depth: NA inches above pipe
Conditions: Gravity to D-Box Equal Distribution	NA inches total
WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM ANY PART OF SEPTIC SYSTEM	M OR REPAIR AREA
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD AREA.	W ON NET AIN ANEA.
NO OTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD AREA.	
**If applicable: I understand the system type specified is different from the type specified on the app	lication. I accept the specifications of this permit.
	2 "
	Date:
Owner/Legal Representative Signature:	Date:
Owner/Legal Representative Signature:	
	shall not be transferred when there is a change in ownership of the site. This
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 the conditions of this permit. SEE ATTACHED SITE SKETCH
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

Harnett County Department of Public Health Site Sketch



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