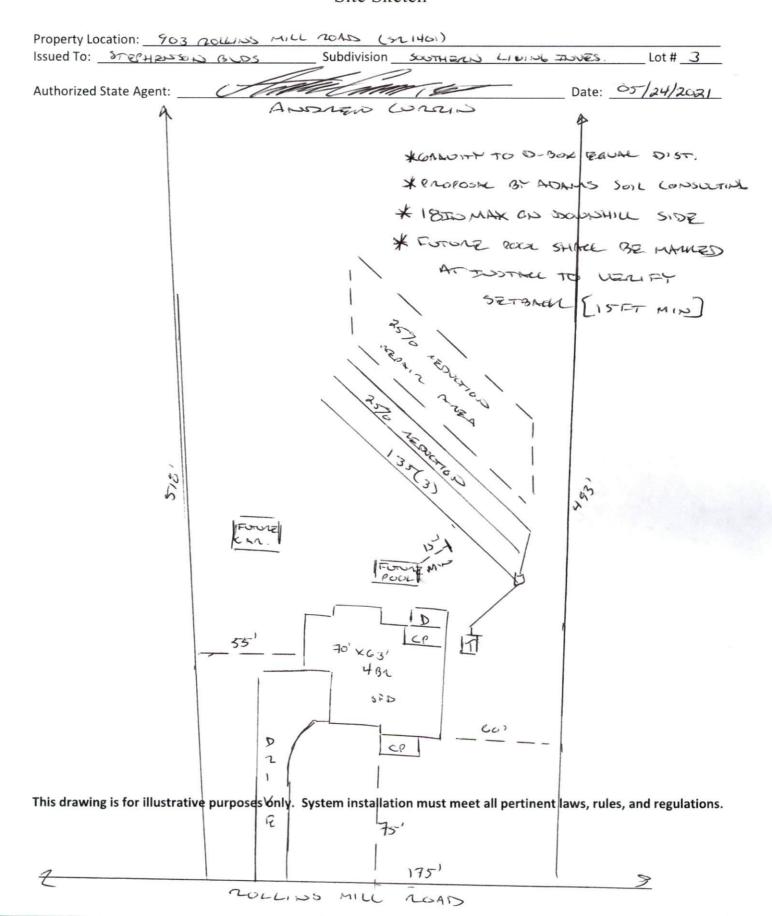
Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: 903 ZOLLIDS MILL 10. (521401) SOUTHTERN LIVING DUS ES, LOT # 3 ISSUED TO: STEPHIENSON GLDS SUBDIVISION REPAIR | EXPANSION Site Improvements required prior to Construction Authorization Issuance: 4-3200con 70'x63' 500 Type of Structure: Proposed Wastewater System Type: 2570 120001010 575. 480 GPD Projected Daily Flow: Number of Occupants: 8 Number of bedrooms: No. Basement Yes 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 NA feet Permit valid for: Five years No expiration Permit conditions: 05/24/2021 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: 903 roums MILL 10. (521401) ISSUED TO: STEPHENSON BLOS SUBDIVISION SOUTHERN UNING THUEST Facility Type: 4-82 70'x63' 500 New Expansion Basement? Yes No Basement Fixtures? Yes Type of Wastewater System** 25% 1200001000 STSTEN (Initial) Wastewater Flow: 480 (See note below, if applicable) 25% VEDSOTON STITER Installation Requirements/Conditions Number of trenches Septic Tank Size 1250 gallons Exact length of each trench __ Pump Tank Size Trenches shall be installed on contour at a gallons Maximum Trench Depth of: 18 (Maximum soil cover shall not exceed (Trench bottoms shall be level to +/-1/4" 36" above the trench bottom) in all directions) Pump Requirements: ft. TDH vs. _ inches below pipe inches above pipe Conditions: GRANITY TO 5- BOX EQUIL DISTIBUTION inches total 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: 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 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. SEE ATTACHED SITE SKETCH Date: 65/24/2021

Construction Authorization Expiration Date: 65/24/2026 Authorized State Agent: ANDREW COMIN

Harnett County Department of Public Health Site Sketch



Stephenson Buildons Fre. - Brilder

