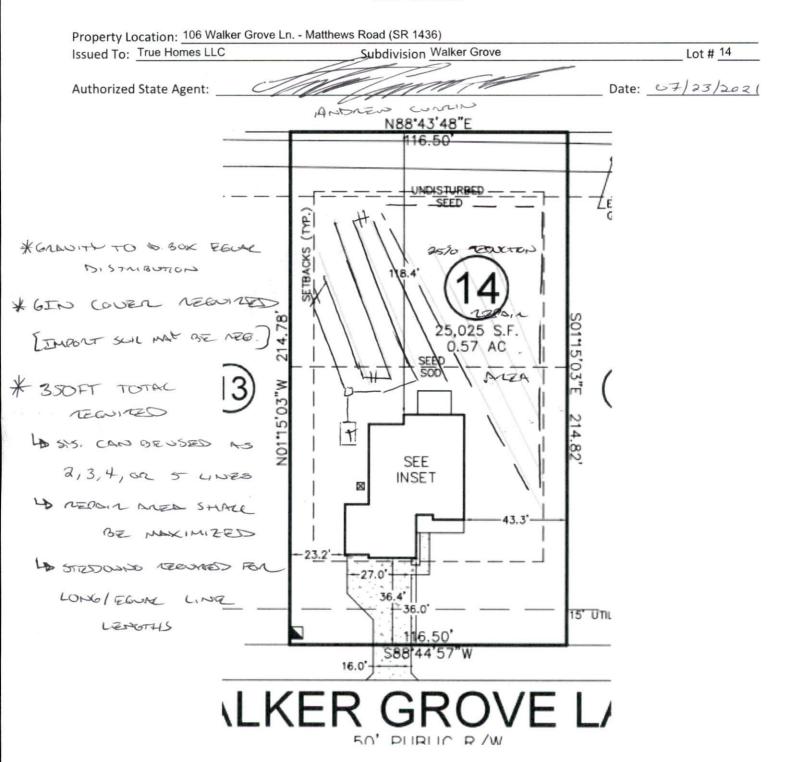
Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: 106 Walker Grove Ln. - Matthews Road (S ISSUED TO: True Homes LLC SUBDIVISION Walker Grove EXPANSION REPAIR Site Improvements required prior to Construction Authorization Issuance: Type of Structure: 60x50 sfd, 4 beds 3.5 baths Proposed Wastewater System Type: 25% Reduction Sys. Projected Daily Flow: 480 GPD Number of bedrooms: 4 Number of Occupants: 8 Basement Yes X 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 NA feet X Five years Permit valid for: ■ No expiration Permit conditions: 07/23/2021 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 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. ISSUED TO: True Homes LLC PROPERTY LOCATION: 106 Walker Grove Ln. - Matthews Road SUBDIVISION Walker Grove Facility Type: 60x50 sfd, 4 beds 3.5 bat Expansion ✓ New Basement Fixtures? Yes Basement? Yes × No Type of Wastewater System** At Grade 2570 TEXTON (Initial) Wastewater Flow: 480 GPD (See note below, if applicable) At- 61ATE 25% TESS. Number of trenches ___ 2 Installation Requirements/Conditions Trench Spacing: _____ Feet on Center Exact length of each trench 175 Septic Tank Size 1000 gallons Soil Cover: 6 inches Turcon Pump Tank Size _____gallons Trenches shall be installed on contour at a Maximum Trench Depth of: 16 (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 Aggregate Depth: GRAVITY TO D. BOX EGUAL DISTUBUTION 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: 1 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 Construction Authorization is subject to compliance with the provisions of the Laws and Rules for | changes. The Construction Authorization shall not be transferred when there is a change in ownership of the site. This Sewage Treatment and Disposal and to the conditions of this permit. SEE ATTACHED SITE SKETCH |
| Authorized State Agent: Cons | Date: 07/23/2021 truction Authorization Expiration Date: 04/23/2021 |

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.