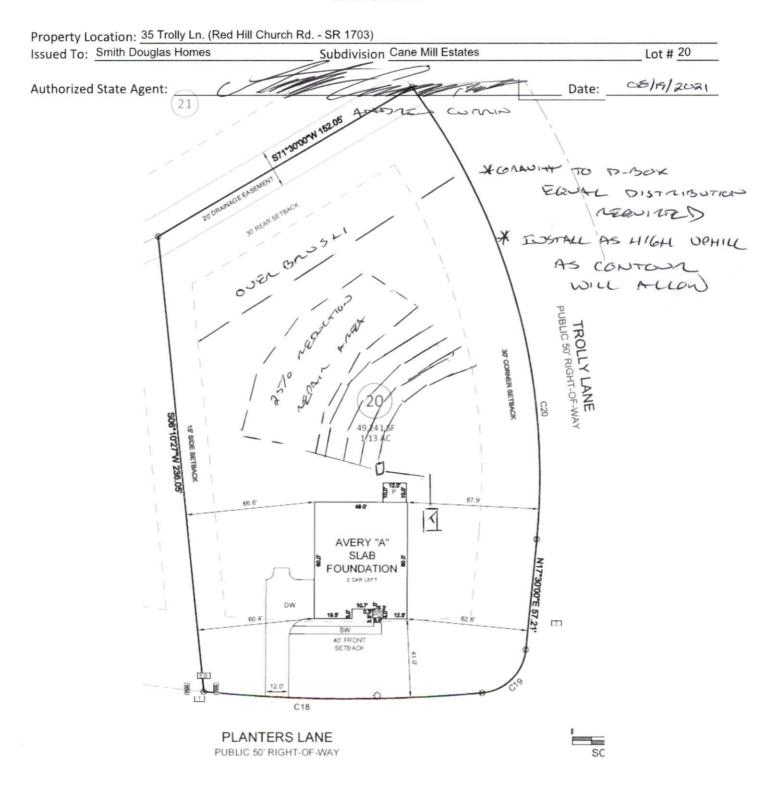
Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: 35 Trolly Ln. (Red Hill Church Rd. - SR 170 ISSUED TO: Smith Douglas Homes SUBDIVISION Cane Mill Estates REPAIR Site Improvements required prior to Construction Authorization Issuance: Type of Structure: 4-Bedroom 48x60 SFD Proposed Wastewater System Type: 25% Reduction Sys. Projected Daily Flow: 480 GPD Number of Occupants: 8 Number of bedrooms: 4 Basement Yes X No No Pump Required: Yes May be required based on final location and elevations of facilities Type of Water Supply: Community Na Public Well Distance from well NA Permit valid for: X Five years No expiration Permit conditions: Authorized State Agent:: 02/19/2021 issuance of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This The issuance of this permit by the Health Department in no way guarantees the 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: Smith Douglas Homes PROPERTY LOCATION: 35 Trolly Ln. (Red Hill Church Rd. - SR SUBDIVISION Cane Mill Estates Facility Type: 4-Bedroom 48x60 SFD ✓ New Expansion Basement? Yes Basement Fixtures? Yes No Type of Wastewater System** 25% 1200CHON 5.55EM (Initial) Wastewater Flow: GPD (See note below, if applicable) 25% NEXXTION Installation Requirements/Conditions Number of trenches Septic Tank Size 1000 gallons Exact length of each trench ___ Trench Spacing: Soil Cover: _ Pump Tank Size _____ Trenches shall be installed on contour at a gallons Maximum Trench Depth of: inches (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 Aggregate Depth: inches above pipe GRAVITY TO D-BOX 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: 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 Jaws and Rules for Sewage Treatment and Disposal and to the conditions of this permit. SEE ATTACHED SITE SKETCH Authorized State Agent: Construction Authorization Expiration Date: _ ANONEW CURRIN

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.