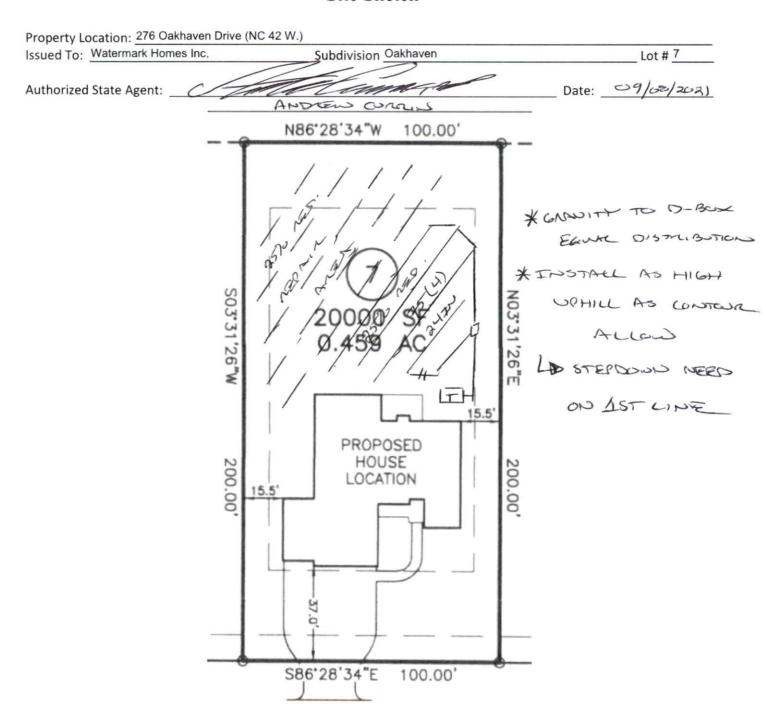
Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

	SUBDIVISION Oakhaven Lot # 7
NEW REPAIR EXPANSION EXPANSION EXPANSION	Site Improvements required prior to Construction Authorization Issuance:
Type of Structure: 4-Bedroom 69x66 SFD	site improvements required prior to construction Authorization issuance.
Proposed Wastewater System Type: 25% Reduction Sys.	
Projected Daily Flow: 480 GPD	
	nax
Basement Yes X No	IMA
Pump Required: Yes No May be required based on final loc	ation and elevations of facilities
Type of Water Supply: Community Public Well Distance	
Permit conditions:	■ No expiration
The same of the sa	
Authorized State Agent::	Date: 69/08/2021 SEE ATTACHED SITE SKETCH
	permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This
site is subject to revocation of the site plan, plat, or the intended use changes. The Improvement P the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.	ermit shall not be affected by a change in ownership of the site. This permit is subject to compliance with the provisions of
the cars and roles for senage realment and objects and to conditions of this period.	
Constant	ation Authorization
Constru	ction Authorization
	ired for Building Permit)
2 (1) 10	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: Watermark Homes Inc.	PROPERTY LOCATION: 276 Oakhaven Drive (NC 42 W.)
	SUBDIVISION Oakhaven LOT # 7
Facility Type: 4-Bedroom 69x66 SFD New	Expansion Repair
Basement? Yes No Basement Fixtures? Yes	□ No
Type of Wastewater System** 2570 REDUCTION	STSTELL (Initial) Wastewater Flow: 480 GPD
(See note below, if applicable ((IIIIIIai) Wastewater Flow. 100
(see note below, if applicable [])	A Sea (Bassie)
25% /500 NEOCTIO	
Installation Requirements/Conditions Number of trench	
	, 0
1	installed on contour at a Soil Cover:inches
	Depth of:inches (Maximum soil cover shall not exceed
	hall be level to +/-1/4" 36" above the trench bottom)
in all directions)	
Pump Requirements:ft. TDH vsGPM	inches below pipe
	Aggregate Depth: inches above pipe
Conditions: GNAVITY TO D-BOX TECHNE	OFFICE VICES NA inches total
WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM AN	Y PART OF SEPTIC SYSTEM OR REPAIR AREA.
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD AREA	
**If applicable: [understand the system type specified is different from the	te 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 ch	anges. 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 Se	wage Treatment and Disposal and to the conditions of this permit. SEE ATTACHED SITE SKETCH
Authorized State Agent:	Date: 69/08/2071
ANDREW CURAIN CONSTR	Date: 69/08/2071 Oction Authorization Expiration Date: 69/08/2020
THE CONTRACT CONSTRACT	The state of the s

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.