Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only an Improvement Permit US 301 PROPERTY LOCATION: SUBDIVISION MILTON BRIAN HODSON ISSUED TO: WHITTENTON BUTS ENT. Site Improvements required prior to Construction Authorization Issuance: REPAIR EXPANSION NEW X Type of Structure: 4-00000 60'X90' 50 Proposed Wastewater System Type: 25% REDUCTION STOTEM Projected Daily Flow: 480 GPD Number of Occupants: Number of bedrooms: X No Basement Yes May be required based on final location and elevations of facilities No. Pump Required: Yes Type of Water Supply: Community Public Well Distance from well NA feet Five years Permit valid for: No expiration 02/25/2022 SEE ATTACHED SITE SKETCH Authorized State Agent:: 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: WHITTENTON GLAS ENT. PROPERTY LOCATION: GRIAN HUDSON MILTON Expansion Facility Type: 4-Br 80'x 90' SIS Basement Fixtures? Yes ☐ No Basement? Yes ____ (Initial) Wastewater Flow: 480 Type of Wastewater System** 25% EDUCTION STSTEM (See note below, if applicable) 25% TEDETION STSTEM Number of trenches 4 Installation Requirements/Conditions Trench Spacing: Feet on Center Exact length of each trench ___ Septic Tank Size 1250 gallons Trenches shall be installed on contour at a Soil Cover: Pump Tank Size _____ gallons Maximum Trench Depth of: 18 inches (Maximum soil cover shall not exceed 36" above the trench bottom) (Trench bottoms shall be level to +/-1/4" in all directions) NA inches below pipe Pump Requirements: ______ft. TDH vs. Aggregate Depth: inches above pipe GRAVITY TO D-BOX EGUAL DISTRIBUTION REGULAD 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 SEE ATTACHED SITE SKETCH 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. Authorized State Agent: _ Construction Authorization Expiration Date: ANDREW CORNIN

Harnett County Department of Public Health Site Sketch

