Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

| A Duildii | PROPERTY LOCATION: 695 Roberts Rd (SR 2158) | |
|--|--|--|
| ISSUED TO: Van Frizzelle | SUBDIVISIONLOT # | |
| _ | | |
| NEW REPAIR EXPANSION L Type of Structure: 46' x 61' SFD | the improvements required prior to constitution that the same | |
| Proposed Wastewater System Type: pump to 25% re | duction | |
| Projected Daily Flow: 360 GPD | QQC(IOT) | |
| Number of bedrooms: 3 Number of Occupants: | 6 max | |
| | U IIIAA | |
| | sed on final location and elevations of facilities | |
| Pump Required: ☑Yes ☐ No ☐ May be required ba Type of Water Supply: ☐ Community ☑ Public ☐ | Well Distance from well feet Permit valid for: | |
| | □ No expiration | |
| refilit Conditions. | | |
| . // 1/ | | |
| Authorized State Agent:: The issuance of this permit by the Health Department in no way guarantees the | REHY Date: 04-22-22 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 thi | s permit. | |
| | C. A. | |
| | Construction Authorization | |
| | (Required for Building Permit) | |
| | 155, .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: Van Frizzelle | PROPERTY LOCATION: 695 Roberts Rd (SR 2158) | |
| ISSUED TO: VALLET TIZZONO | CURDIVICION LOT # | |
| Facility Type: 46' x 61' SFD | SUBDIVISION LOT # | |
| 120110/ 1//01 | | |
| Basement? Yes No Basement Fixtures? | | |
| Type of Wastewater System**pump to 25% re | eduction (initial) Wastewater flow. | |
| (See note below, if applicable) | and the state of t | |
| pump to 25% i | reduction (Repair) | |
| Installation Requirements/Conditions Num | mber of trenches 1 | |
| Septic Tank Size 1000 gallons Exa | ct length of each trench 225feet | |
| | nches shall be installed on contour at a Soil Cover: 6inches | |
| Ma | cimum Trench Depth of: 18 - 20 inches (Maximum soil cover shall not exceed | |
| | ench bottoms shall be level to +/-1/4" 36" above the trench bottom) | |
| , | all directions) | |
| Pump Requirements:ft. TDH vsGF | in the following | |
| rump requirements. | Aggregate Depth: inches above pipe | |
| (- Fi | index and | |
| Conditions: | | |
| The state of the s | ST. COOM ANY DADT OF CENTIC SYSTEM OR DEDAID ADEA | |
| | FT. FROM ANY PART OF SEPTIC SYSTEM OR REPAIR AREA. | |
| NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIL | I 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. | | |
| applicable. I directisand the system type specimes is direction and the system type specimes is | | |
| Owner/Legal Representative Signature: | Date: | |
| Owner/Legal Representative Signature: | 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 | | |
| William Residence of August to Company of the Compa | | |
| | LEH Date: 04-22-22 | |
| TAUTHORIZED STATE ARCHIT. | | |
| (| Construction Authorization Expiration Date: 04-22-27 | |

Harnett County Department of Public Health Site Sketch

| Property Location: 695 Roberts | Rd (SRZ158) | |
|--------------------------------|-----------------|-----------------------|
| Issued To: Van Frizzelle | Subdivision | Lot # |
| Authorized State Agent: Mac | L de REHS | Date: <u>04-22-22</u> |
| | Control Control | (Diet Drive) |

of Clear Flagged OFF of Keep Max Trench Depth at 20" Septic System + repair arra without remains any of the original Soil. + Call For Septic System layout before Install woodud * All parts of Septic System MUST remain > 50' From ANY Part OF Pond or Draining! SEPTIC SYSTEM trea For pand Pord 3 8-

This drawing is for illustrative purposes only. System installation must meet all pertinent laws, rules, and regulations.