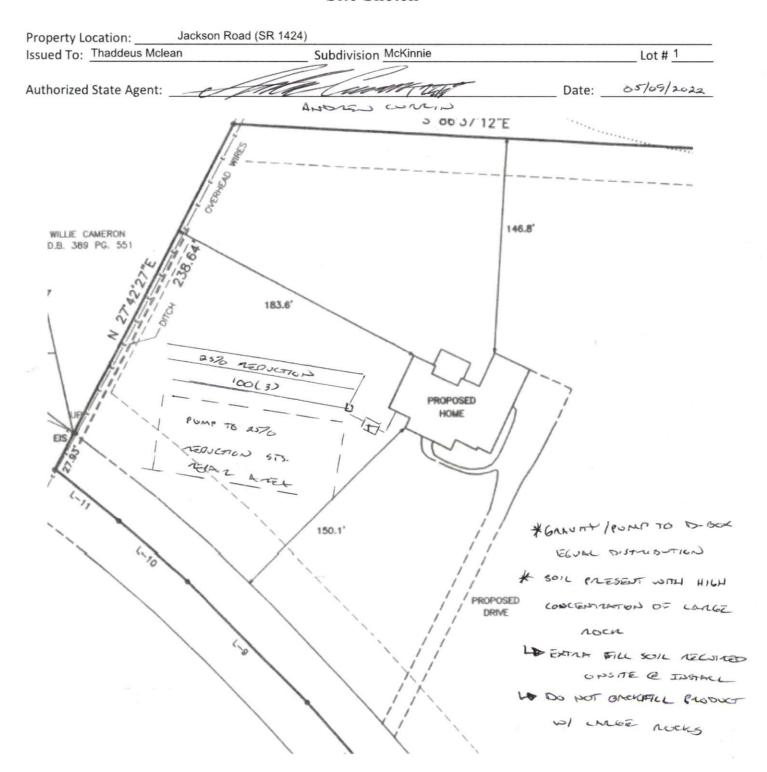
Harnett County Department of Public Health

Improvement Permit A building permit cannot be issued with only an Improvement Permit

	PROPERTY LOCATION: Jackson Road (SR 1424)
ISSUED TO: Thaddeus Mclean	SUBDIVISION McKinnie LOT # 1
NEW ☑ REPAIR ☐ EXPANSION ☐	Site Improvements required prior to Construction Authorization Issuance:
Type of Structure: 77x40 (3bed/2.5ba) sfd	
Proposed Wastewater System Type: 25% Reduction Sy	/S,
Projected Daily Flow: 360 GPD	
Number of bedrooms: 3 Number of Occupants: 6	max
Basement Yes No	
Pump Required: Yes No May be required based	on final location and elevations of facilities Distance from well NA feet Permit valid for: Five years
Type of Water Supply: Community Public Wel	Distance from well NAfeet Permit valid for: ≥ Five years ☐ No expiration
Permit conditions:	по ехриалон
Authorized State Agent::	Date: 05/09/2622 SEE ATTACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guarantees the issu	ance of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This
	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 per	mit.
	Construction Authoritation
	Construction Authorization
	(Required for Building Permit)
	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: Thaddeus Mclean	PROPERTY LOCATION: Jackson Road (SR 1424)
	SUBDIVISION McKinnie LOT # 1
Facility Type: 77x40 (3bed/2.5ba) sfd	
Basement? Yes No Basement Fixtures?	1 1945/11 17 17 17 17 17 17 17 17 17 17 17 17 1
Type of Wastewater System** 2570	
(See note below, if applicable)	
	STSTEM (Repair)
•	r of trenches 3
	ength of each trench
	es shall be installed on contour at a Soil Cover: 6-8 inches
-	Im Trench Depth of: 18-20 inches (Maximum soil cover shall not exceed
	bottoms shall be level to +/-1/4" 36" above the trench bottom)
	directions)
	inches below pipe
Pump Requirements:ft. TDH vsGPM	Aggregate Depth: inches above pipe
()	Aggregate Depth inches above pipe
Conditions: SEE SITE PLAN	——————————————————————————————————————
WHITE THE AMENDE IN THE PROPERTY OF THE PARTY OF THE PART	CROWN AND OF CENTIC CUCTEN ON DEPAID AREA
WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT.	
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN F	ELD AREA.
**If applicable: / understand the system type specified is differ	ent from the type specified on the application. I accept the specifications of this permit.
- approach	
Owner/Legal Representative Signature:	Date:
	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	CONTRACTOR OF THE STATE OF THE
Authorized State Agent.	Man 12/1 Date: 05/09/2022
, ,	Construction Authorization Expiration Date: 05/09/2027
ANDREW CORNE	construction Authorization Expiration Date.

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.