## Harnett County Department of Public Health Revised for Owner Improvement Permit

A building permit cannot be issued with only an Improvement Permit

6 7	PROPERTY LOCATION: 179 Rocking Canal PI (US 401S)	
ISSUED TO: Signature Home Builders Inc	SUBDIVISION WIlliams Farms LOT #	13
NEW   REPAIR   Type of Structure: 57'x54' SFD	Site Improvements required prior to Construction Authorization Issuance:	
Proposed Wastewater System Type: 25% reduction		
Projected Daily Flow: 360 GPD	-	
	max	
Basement Yes 🗵 No		
Pump Required: Yes No May be required based on final lo		
Type of Water Supply: Community Public Well Distan		
Permit conditions:	■ No expira	ition
11 11		
Authorized State Agent:: Male WAEHS	Date: 10-10-23 SEE ATTACHED SITE SKETC	H
0	permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their require	
site is subject to revocation if the site plan, plat, or the intended use changes. The Improvement the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.	Permit shall not be affected by a change in ownership of the site. This permit is subject to compliance with the	provisions of
Constr	uction Authorization	
-	uired 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: Signature Home Builders Inc PROPERTY LOCATION: 179 Rocking Canal PI (US 401S)  SUBDIVISION Williams Farms LOT # 13		
Facility Type: 57'x54' SFD New		13
	Expansion Repair	
	No (Livin) Western to the 200	CDD
Type of Wastewater System** 25% reduction	(Initial) Wastewater Flow: 360	_ GPD
(See note below, if applicable □) 25% reduction	(0,;-)	
	(Repair)	
Installation Requirements/Conditions Number of trend		
,	each trench 150feet Trench Spacing: 9 Feet on Center	
	e installed on contour at a Soil Cover: 6inches	
	Depth of: 18-24 inches (Maximum soil cover shall not exceed	
•	shall be level to +/-1/4" 36" above the trench bottom)	
in all directions)		
Pump Requirements:ft. TDH vsGPM	inches b	
	Aggregate Depth:inches a	
Conditions:	Jni	thes total
WATER LINES (INCLIDING IRRIGATION) MILET DE JOET EROM A	NV DADT OF CEDTIC CYCTEM OD DEDAID ADEA	
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:	Date:	
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 Laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit.  SEE ATTACHED SITE SKETCH		
Authorized State Agent: Mac AEHS Date: 10-10-23		
Construction Authorization Expiration Date: 10-10-28		
Communication restrict Expression Date. 10 10 Ed		

## Harnett County Department of Public Health Site Sketch

Property Location: 179 Rocking Canal PI (US 401S)

Issued To: Signature Home Builders Inc Subdivision Williams Farms Lot # 13

Authorized State Agent: Date: 10-10-23

