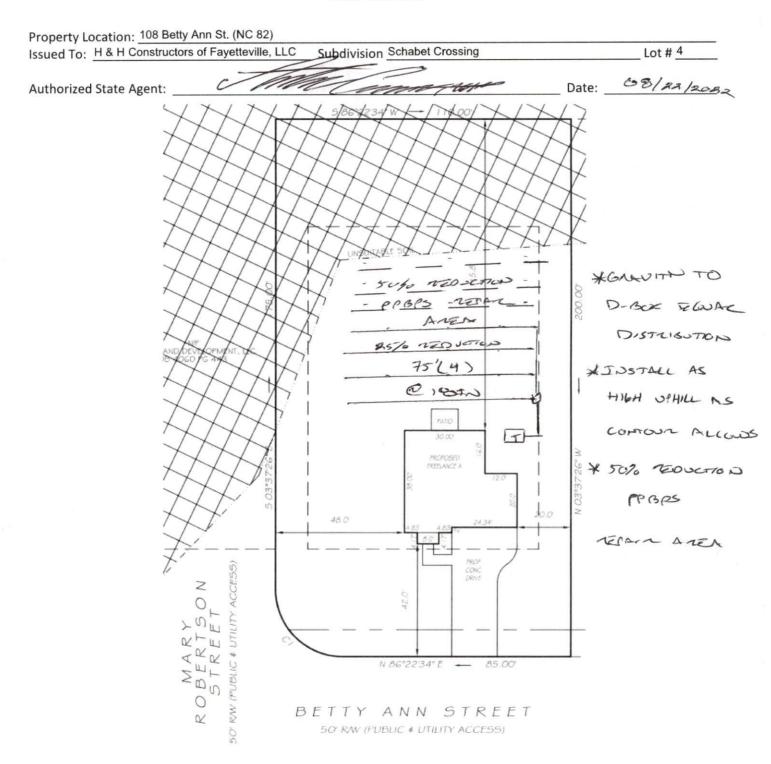
Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: 108 Betty Ann St. (NC 82) ISSUED TO: H & H Constructors of Fayetteville, LL SUBDIVISION Schabet Crossing EXPANSION Site Improvements required prior to Construction Authorization Issuance: REPAIR Type of Structure: 42x42 sfd, 4 beds 2.5 baths Proposed Wastewater System Type: 25% Reduction System Projected Daily Flow: 480 GPD Number of bedrooms: 4 Number of Occupants: 8 X No Basement Yes X No May be required based on final location and elevations of facilities Pump Required: Yes Type of Water Supply: Community 🗵 Public 🗌 Well Distance from well NA X Five years Permit valid for: No expiration Permit conditions: SEE ATTACHED SITE SKETCH Date: 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: H & H Constructors of Fayetteville, PROPERTY LOCATION: 108 Betty Ann St. (NC 82) SUBDIVISION Schabet Crossing Facility Type: 42x42 sfd, 4 beds 2.5 bat Expansion Basement Fixtures? Yes Basement? Yes × No (Initial) Wastewater Flow: 480 GPD Type of Wastewater System** 25/0 TEDUCTION 5757EN (See note below, if applicable) 50% raveron PPBS STSTEMBEDAIR Number of trenches 4 Installation Requirements/Conditions Trench Spacing: 9 Feet on Center Soil Cover: 6 inches Exact length of each trench ____ Septic Tank Size 1000 gallons Trenches shall be installed on contour at a Pump Tank Size _____ gallons Maximum Trench Depth of: 180 (Maximum soil cover shall not exceed 36" above the trench bottom) (Trench bottoms shall be level to +/-1/4" in all directions) ~A inches below pipe Pump Requirements: _____ ft. TDH vs. __ ~ inches above pipe Aggregate Depth: Conditions: GRAVITY TO D-BOX ELWAL DISTRIBUTION 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: 08/22/2027 ANDREW CURLY

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.