Harnett County Department of Public Health

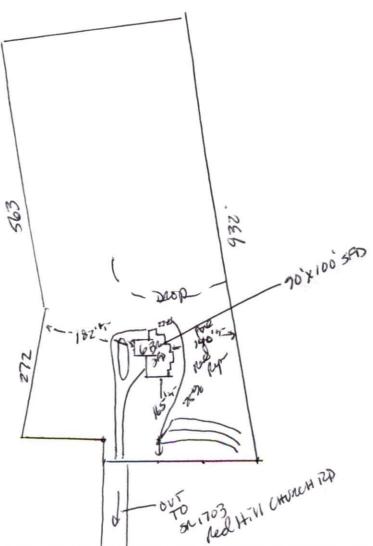
Improvement Permit

PROPER	Y LOCATION: SC 1703 Rod AT N CH RD	
ISSUED TO: Agron + Rosando Alvanaz SUBDIVI	SION LOT #	
NEW REPAIR EXPANSION	Site Improvements required prior to Construction Authorization Issuance:	
Type of Structure:		
Proposed Wastewater System Type: 25% NBDUCTU		
Projected Daily Flow: 120 GPD		
Number of bedrooms: Number of Occupants: 12 max		
Basement	d destine of failure	
Pump Required: Mes No May be required based on final location a Type of Water Supply: Community Public Well Distance from	well 50 14 feet Permit valid for: Markets	
Permit conditions:	□ No expiration	
Trinit Conditions.		
SM 1 Az	BUS	
Hollionico state remi	Date: 11-7-22 SEE ATTACHED SITE SKETCH	
	he permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This Il 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)		
	1.1959 are incorporated by references into this permit and shall be met. Systems shall be installed in accordance	
with the attached system layout.		
ISSUED TO: AMON + ROSANIO ALVANOZ PR	1.00 11	
	BDIVISIONLOT #	
	Expansion Repair	
Basement? Yes No Basement Fixtures? Yes No Type of Wastewater System**	(Initial) Wastewater Flow: 720 GPD	
,, _	(Initial) Wastewater Flow: GPD	
(See note below, if applicable)	(0	
	(Repair)	
	nch 150 feet Trench Spacing: 7 Feet on Center	
Septic Tank Size 1500 gallons Exact length of each tre Pump Tank Size 1600 gallons Trenches shall be installed.		
Maximum Trench Depth		
(Trench bottoms shall be		
in all directions)	Teter to 17-174 30 above the detect bottomy	
Pump Requirements:ft. TDH vsGPM	inches below pipe	
rump kedulrementsit. 10h vs011	Aggregate Depth: Z inches above pipe	
Conditions: Conductor to meet		
conditions.	TASTALL.	
WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM ANY PAR	T OF CEPTIC CYCTEM OR DEPAIR AREA	
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD AREA.	TOT SETTIC STSTEM ON NETAIN ANEA.	
NO UTILITIES ALLOWED IN INITIAL OR RETAIR DRAIN FIELD AREA.		
**If applicable: 1 understand the system type specified is different from the type	specified on the application. I accept the specifications of this permit.	
	Date:	
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		
construction authorization is subject to compliance with the provisions of the taws and volles for sewage from	annum and copyright and to the computation of this period.	
Authorized State Agent:		
Authorized State Agent	Authorization Conjuntion Dates 11-7-27	
Construction Authorization Expiration Date:		

Application # 50 2210-0045

Harnett County Department of Public Health Site Sketch

Property Location: Sci 1703 RED Hill Church RD	
Issued To: Ann + Rosani o Alvan Subdivision_	Lot #
T IN THENS	11-7-22
Contractor to meet onsete prior to INSTALL	



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