Harnett County Department of Public Health

Improvement Permit

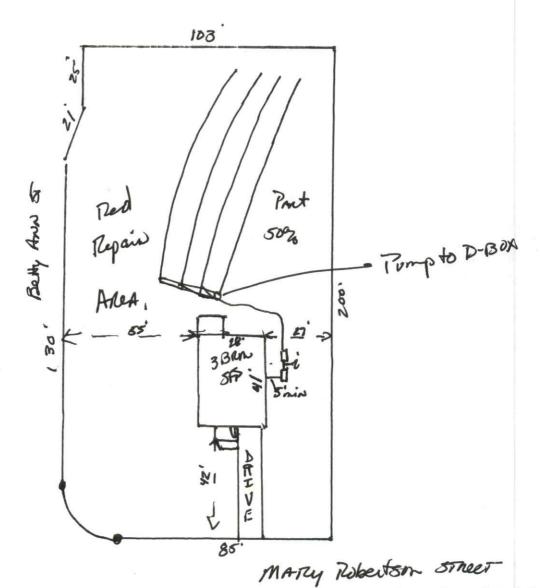
A building permit cannot be issued	with only an Improvement Permit
PROPERTY L	OCATION: Hwa BZ
ISSUED TO: DREAM Finders Homes UC SUBDIVISION	SCHABBLI CASSING LOT # 35
NEW REPAIR EXPANSION	Site Improvements required prior to Construction Authorization Issuance:
Type of Structure:	
Proposed Wastewater System Type: 25% DESWCTON	
Projected Daily Flow:GPD	
Number of bedrooms: Number of Occupants: max	
Basement Yes No	11.30
Pump Required: Tes No May be required based on final location and e	
Type of Water Supply: Community Public Well Distance from well	feet Permit valid for: Five years No expiration
Permit conditions:	— Ho Expiration
A A I HAP DAY	15
/ 1/1 / 1	/ Zo - 3 % CET ATTACHED CITE CHETCH
Authorized State Agent:: Date	
The issuance of this permit by the Hearth Department in no way guarantees the issuance of other permits. The p site is subject to revocation if the site plan, plat, or the intended use changes. The Improvement Permit shall not	ermit holder is responsible for checking with appropriate governing bodies in infecting their requirements. 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.	be affected by a change in ownership of the site. This period is analysis to companie the site of the
the Laws and rules for sewage treatment and proposal and to continues of this permit.	
Construction	Aushanization
Construction	Authorization
(Required for B	uilding Permit)
The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .1957, .1958, and .195	59 are incorporated by references into this permit and shall be met. Systems shall be installed in accordance
with the attached system layout.	
Deces () 1/2 1/4 1/4	RTY LOCATION: Hw & 87
133010 10. 10371170 1.7	0 1 1 23
	Tiblott Scaring Constitution of the Constituti
Facility Type: New Exp	pansion Repair
Basement? Yes No Basement Fixtures? Yes No	
Type of Wastewater System** 25% TENDESTON Syste	(Initial) Wastewater Flow: 360 GPD
(See note below, if applicable)	
50% TEDUCAN	(Repair)
	014
	100 oc 15 feet Trench Spacing: Feet on Center
Pump Tank Size / 30 0 gallons Trenches shall be installed o	ii contour ii ii
Maximum Trench Depth of:	
(Trench bottoms shall be lev	rel to +/-1/4" 36" above the trench bottom)
in all directions)	
Pump Requirements:ft. TDH vsGPM	
rump kedunements.	Aggregate Depth: inches above pipe
	/Z inches total
Conditions:	
WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM ANY PART O	F 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	ecified 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 Co	Date:
This Construction Authorization is subject to revocation if the site plan, plat, or the intended use changes. The Co	nstruction 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	nt and Disposal and to the conditions of this permit. SEE ATTACHED SITE SKETCH
	and bespecial and to the control of
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	B
Ma hate	P
Authorized State Agent Manhand	Date: 1-30-23 horization Expiration Date: 1-30-28

Application # 5FD 22/2 -0054

Harnett County Department of Public Health Site Sketch

Property Location: Hwy 82
Issued To: DREAM FINDERS Homes LUSubdivision SCHABERT CROSSING Lot # 33

Authorized State Agent: Date: 1-30-23



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