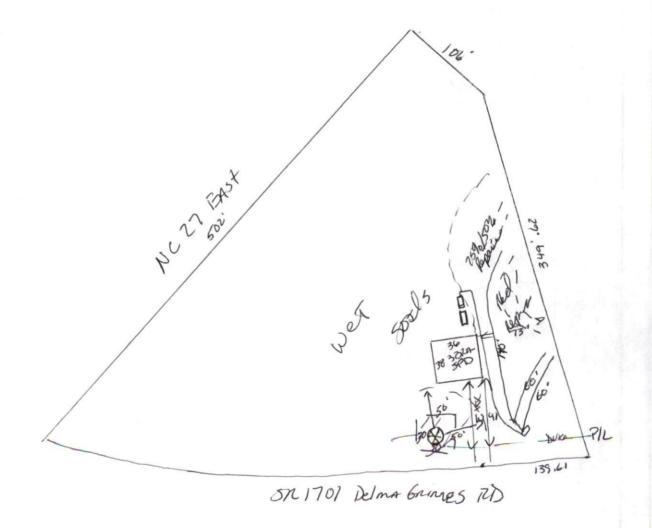
Harnett County Department of Public Health

Improvement Permit

A 1	uilding permit cannot be issued with only an Improvement Permit	7)	
ISSUED TO: DOVE Homes	PROPERTY LOCATION: SKITOI Delms Grimes SUBDIVISION	LOT #	
NEW REPAIR EXPANSION	ANY OF THE RESIDENCE OF THE PROPERTY OF THE PR		
Type of Structure:	57A)		
Projected Daily Flow: 360 GPD	V N		
Number of bedrooms: Number of Occupa	nts: 6 max		
Basement Nes No			
	ed based on final location and elevations of facilities	[]/:	
	Well Distance from well feet Permit valid for:	No expiration	
Permit conditions:		— но ехриалоп	
	1 LAR REUS		
Authorized State Agents ()	Dutt.	CHED SITE SKETCH	
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, .19 with the attached system layout.	54, .1955, .1956, .1957, .1958. and .1959 are incorporated by references into this permit and shall be met. Systems	shall be installed in accordance	
ISSUED TO: DOVE HOMES L	LC PROPERTY LOCATION: SUTTO 1 Define Gra	10T # /	
Facility Type:	New Expansion Repair		
Facility Type: Basement? Yes No Basement Fixt			
Type of Wastewater System** 25% TCEDUC	70 PA 20 PA	360 GPD	
(See note below, if applicable (
25%/50% 1	ESUCTION (Repair)		
Installation Requirements/Conditions	Number of trenches		
Septic Tank Size 1000 gallons	Exact length of each trench 260 feet Trench Spacing:	Feet on Center	
Pump Tank Size 1000 gallons		nches	
,	Maximum Trench Depth of: 18" inches (Maximum soil cover shall n		
	(Trench bottoms shall be level to +/-1/4" 36" above the trench bottoms	om)	
	in all directions)		
Pump Requirements:ft. TDH vs	_GPM	inches below pipe	
	Aggregate Depth:	inches above pipe	
Conditions: Dystem 15	- howe LSS relay out lats.	Inches total	
Aggregate Depth: 2 inches above pipe Conditions: System Is Florged on STE (INSTALL AS PLAGED) 12 inches total IF NO FLOS PRESENT HONE LOS PELAG ON FILES. 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,	lat, or the intended use changes. The Construction Authorization shall not be transferred when there is a change in o	wnership 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.			
Authorized State Agent: James & Manhan Date: 6-20-23			
Authorized State Agent.	Construction Authorization Expiration Date: 6-70-28		

Harnett County Department of Public Health Site Sketch

Property Location: 31 701 Delma Gumes PD	
Issued To: Dar Homes LLC Subdivision	Lot #/
Authorized State Agent: Markon State Date:	6-20-23
Follow Consoltants Flagged lagoot on Ensimellation.	
* IF NOT Flagged HAVE LSS Relay out All INITIAL CENCS	
* NO WATER ON POWER LEWES IN SEPTIRE ON Repair Arons	



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