Harnett County Department of Public Health Improvement Permit

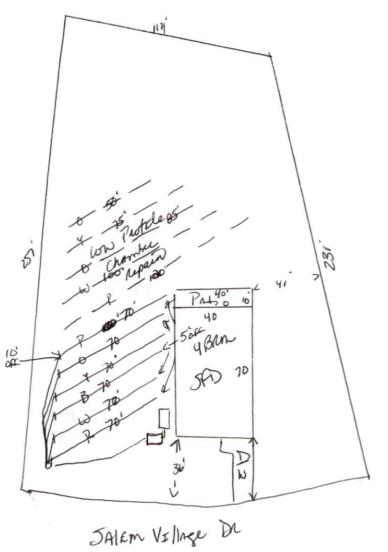
A building permit cannot be issued with only an Improvement Permit
PROPERTY LOCATION Se 1417 Bakestony 165
ISSUED TO: NEW MOME THE SUBDITISION WILLIAM TO T
NEW REPAIR EXPANSION EXPANSION
Type of Structure: 3143
Proposed Wastewater System Type: 100 Profest
Projected Daily Flow: 480GPD
Number of bedrooms: 4 Number of Occupants: 8 max
Basement Yes No Pump Required: Yes No What be required based on final location and elevations of facilities
Well Distance from well feet Permit valid for:
Permit conditions:
Date: 5-24-UB SEE ATTACHED SITE SKETCH
Authorized State Agent with appropriate governing bodies in meeting their requirements. This
The issuance of this permit by the Health Department in no way guarantees the issuance of other permits, the permit holder is responsible to crevication if the arte 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 Ruilding 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: New Home FIX PROPERTY LOCATION: ST. 1417 Bakedown PLS SUBDIVISION Wood Bridge South LOT # 24
SUBDIVISION Woodbidge South LOT # 24
C Francisco Renair
780
Type of Wastewater System**
(for note below if applicable)
(See note below, II applicable () Con Profile CHAMPLES (Repair)
Installation Requirements/Conditions Number of trenches 400 Foot on Conter
Sentic Tank Size Pallons Exact length of each trench Description Spacing: Freet on Center
Trenches shall be installed on contour at a soil cover.
Maximum Trench Depth of: The miches (Maximum 30) Color States
(Trench bottoms shall be level to +/-1/4" 36" above the trench bottom)
in all directions)
Pump Requirements:ft. TDH vsGPM
Apprenate Depth. Inches above pro-
Conditions: 6 × 70 (INRS = 420 TOTAL 12 inches total
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: understand the system type specified is different from the type specified on the application. accept the specifications of this permit.
**II applicable: I understand the system type specified is different from the type specified on the approach
Date:
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 CFF ATTACHED SITE SKETCH
Constitution 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.
Construction Authorization is subject to Companies with the provided in the Provided Services 8-4-23
Date: 5-79-7/3
Authorized State Agent Construction Authorization Expiration Date: 5 24 28
8-4-28

Harnett County Department of Public Health Site Sketch

Property Location: SA 1417 Dake Jown 75

Issued To: NEW Home Tyc Subdivision Wardhard ge Southe Lot # 24

Authorized State Agent: Date: 8-4-23



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