Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: 98 Thistle Ct (SR 1229) ISSUED TO: Weaver Homes SUBDIVISION West Preserve EXPANSION Site Improvements required prior to Construction Authorization Issuance: NEW X Type of Structure: 51'x54' SFD Proposed Wastewater System Type: 25% reduction Projected Daily Flow: 360 Number of Occupants: 6 Number of bedrooms: 3 Basement Yes X No ☐ No May be required based on final location and elevations of facilities Pump Required: Yes X Five years Type of Water Supply: Community Public Well Distance from well _______feet Permit valid for: No expiration Permit conditions: Date: 07-03-23 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: Weaver Homes PROPERTY LOCATION: 98 Thistle Ct (SR 1229) SUBDIVISION West Preserve Facility Type: 51'x54' SFD Expansion × New Basement? Yes X No Basement Fixtures? Yes X No 25% reduction (Initial) Wastewater Flow: 360 GPD Type of Wastewater System** (See note below, if applicable) 25% reduction Number of trenches 1 Installation Requirements/Conditions Septic Tank Size 1000 gallons Exact length of each trench 180 Trench Spacing: 9 Feet on Center Trenches shall be installed on contour at a Pump Tank Size _____ gallons Soil Cover: 6 Maximum Trench Depth of: 18-26 (Maximum soil cover shall not exceed inches (Trench bottoms shall be level to +/-1/4" 36" above the trench bottom) in all directions) Pump Requirements: _____ ft. TDH vs. __ inches below pipe Aggregate Depth: inches above pipe Conditions: _ 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. Date: 07-03-23 Authorized State Agent: Construction Authorization Expiration Date: 07-03-28

Harnett County Department of Public Health Site Sketch

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