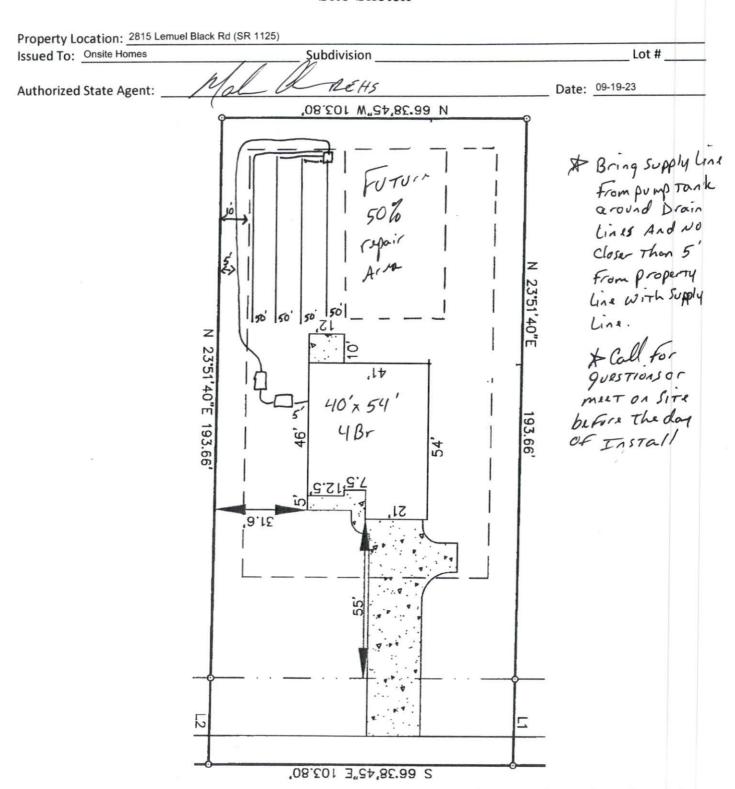
Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

	Armen Committee	uel black Ru (SR 11	
ISSUED TO: Onsite Homes SUBDIVISION SUBDIV		uired prior to Construction Authoriza	LOT #
NEW REPAIR EXPANSION L Type of Structure: 40'x54' SFD	site improvements requ	arred prior to construction Authoriza	tion issuance.
Proposed Wastewater System Type: pump to 50% reduction			
Projected Daily Flow: 480 GPD			
Number of bedrooms: 4 Number of Occupants: 8 max			
Basement Yes No			
Pump Required: Yes No May be required based on final location and	elevations of facilities		
Type of Water Supply: Community Public Well Distance from we		Permit valid for:	▼ Five years
Permit conditions:			☐ No expiration
0 -/-	te: 09-19-23		HED SITE SKETCH
The issuance of this permit by the Health Department in no way guarantees the issuance of other permits. The			
site is subject to revocation if the site plan, plat, or the intended use changes. The Improvement Permit shall is the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit	lot be affected by a change in owner	simp of the site. This permit is subject to co	impliance with the provisions of
Construction	Authorization		
	Authorization		
7	Building Permit)		
The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .1957, .1958. and .1 with the attached system layout.	1959 are incorporated by references	into this permit and shall be met. Systems sh	nall be installed in accordance
with the attached system before.			
ISSUED TO: Onsite Homes PROF	PERTY LOCATION: 2777	Lemuel Black Rd (S	R 1125)
SUBC	IVISION		LOT #
Facility Type: 40'x59' SFD 💮 New 🗆 E	xpansion Repair		
Basement? ☐ Yes ☒ No Basement Fixtures? ☐ Yes ☒ No	100		
Type of Wastewater System** pump to 50% reduction		(Initial) Wastewater Flow: 4	80 GPD
(See note below, if applicable ((milal) wastemater nom _	
pump to 50% reduction	(Repair)		
Installation Requirements/Conditions Number of trenches 4	(nepair)		
Septic Tank Size 1000 gallons Exact length of each trenc	h 50 feet	Trench Spacing: 9	eet on Center
1000			ches
		(Maximum soil cover shall no	T-12-7-1
Maximum Trench Depth of:		Table 100 to 100	
(Trench bottoms shall be le	evel to +/-1/4	36" above the trench botton	m)
in all directions)			
Pump Requirements:ft. TDH vsGPM			inches below pipe
		Aggregate Depth:	inches above pipe
Conditions:			inches total
WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM ANY PART	OF SEPTIC SYSTEM OR R	EPAIR AREA.	
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD AREA.			
**If applicable: I understand the system type specified is different from the type s	pecified on the application.	accept the specifications of the	is permit.
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 is subject to compliance with the provisions of the Laws and Rules for Sewage Treatn	nent and Disposal and to the condition	ons of this permit. SEE A	ITACHED SITE SKETCH
		2010 VIII SEIS	
Authorized State Agent: Mal A 25.45 Date: 09-19-23			
	uthorization Expiration D	ate: 09-19-28	

Harnett County Department of Public Health Site Sketch



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