Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

| | PROPERTY LOCATION | W: 170 KODE | I I I I I I I I I I I I I I I I I I I | |
|--|--|----------------------------|--|--|
| ISSUED TO: KB Home | SUBDIVISION BI | rchwood Gro | ove | LOT # 52 |
| NEW 🔀 REPAIR 🗌 EXPANSIO | ON 🗍 | ite Improvements req | uired prior to Construction Aut | thorization Issuance: |
| Type of Structure: SFD(50'x40') | | | | |
| Proposed Wastewater System Type: 25% Reduc | tion System | | | |
| Projected Daily Flow: 600 GPD | HOTT OYOLOTT | | | |
| Number of bedrooms: 5 Number of Occu | | | | |
| | pants: 10 max | | | |
| Basement Yes No | | | | |
| | ired based on final location and elevation | | 5 | ⊠ e: |
| Type of Water Supply: 🔲 Community 🛛 Public | Well Distance from well | feet | Permit valid for: | = ' |
| Permit conditions: | | | | No expiration |
| - Am | | | | |
| | | 00/00 | | |
| Authorized State Agent:: | RENS Date: 9/ | | | ATTACHED SITE SKETCH |
| The issuance of this permit by the Health Department in no way guar- | | | | |
| site is subject to revocation if the site plan, plat, or the intended use | | ected by a change in owner | rship of the site. This permit is subjec | t to compliance with the provisions of |
| the Laws and Rules for Sewage Treatment and Disposal and to condition | ns of this permit. | | | |
| 4 | | | | |
| | Construction Aut | norization | | |
| | A STATE OF THE STA | | | |
| The construction and installation requirements of Rules .1950, .1952, . | (Required for Building | | into this assert and shall be mot for | some shall be installed in accordance |
| the construction and installation requirements of Kules . 1950, . 1952, . with the attached system layout. | 1734, .1735, .1730, .1737, .1730. and .1737 are | incorporated by references | into this permit and shall be met sys | tems shall be installed in accordance |
| The attached system layout. | | | | |
| ISSUED TO: KB Home | PROPERTY I | OCATION: 176 F | Robert Howe | |
| 10. <u></u> | | Birchwood | | LOT # 52 |
| SED(50'y40') | | _ | Olove | LOI // OZ |
| Facility Type: SFD(50'x40') | New Expansion | n 🔲 Repair | | |
| | ctures? Yes No | | | |
| Type of Wastewater System** 25% Reduc | tion System | | (Initial) Wastewater Flo | w: 600 GPD |
| (See note below, if applicable) | | | | |
| Panel Bloc | k | (Repair) | | |
| | Number of trenches 1 | () | | |
| nstallation Requirements/Conditions | | | T 1 C 0 | r c |
| Septic Tank Size 1250 gallons | Exact length of each trench 45 | | Trench Spacing: 9 | |
| Pump Tank Sizegallons | Trenches shall be installed on cor | tour at a | Soil Cover: 12 | inches |
| | Maximum Trench Depth of: 24 | inches | (Maximum soil cover sh | all not exceed |
| | (Trench bottoms shall be level to | +/-1/4" | 36" above the trench | bottom) |
| | in all directions) | | | , |
| Ruma Raminamants. 6 TDU us | <u> </u> | | | inches below pipe |
| Pump Requirements:ft. TDH vs | GFF1 | | | |
| 0 | C | | Aggregate Depth: | inches above pipe |
| Conditions: FLOW REDUCTION | SYSTEM | | | inches total |
| | | | | |
| WATER LINES (INCLUDING IRRIGATION) MUST | RE 10FT EDOM ANY PART OF SE | PTIC CYCTEM OR | DEPAIR AREA | |
| | | THE STATEM OR | ALI MIN MALA. | |
| NO UTILITIES ALLOWED IN INITIAL OR REPAIR | DRAIN FIELD AREA. | | | |
| **If applicable: [understand the system type specifie | ed is different from the type specified | on the application | I accent the specifications | of this permit |
| ii applicable. I understand the system type specific | o is different from the type specified | on the application | . Taccept the specimeations | or ans permie. |
| 0 " 10 " " | | | Δ. | |
| Owner/Legal Representative Signature: | | | Date: | |
| This Construction Authorization is subject to revocation if the site plan | 133.1 | | | range of the contract of the c |
| Construction Authorization is subject to compliance with the provisions | of the Laws and Rules for Sewage Treatment and | Disposal and to the condit | ions of this permit. | SEE ATTACHED SITE SKETCH |
| | | | | |
| Authorized State Agent: | REH | Date | 9/29/23 | |
| Authorized State Agent. | | | Date: 9/29/28 | |
| | | | into: CAI /CAI /M | |

Harnett County Department of Public Health Site Sketch

| Property Location: 176 Robert Howe | | | | | | | |
|------------------------------------|------|---------------|-----------------|---------|----------|--|--|
| Issued To: KB Home | do d | Subdivision B | rchwood Grove | | Lot # 52 | | |
| | | - CUE (~ | IVER TOLKSDOPF) | | 2/20/22 | | |
| Authorized State Agent: | 1/1 | All BEIR CON | INCE TOLKSDOLG) | Date: S | 3/29/23 | | |

