Harnett County Department of Public Health Improvement Permit

A building permit cannot be issued with only an Improvement Permit

C 11 C	PROPERTY LOCATIO	N: 60 Holly	Grove (n h Phose 1	
				LOT # _6
NEW REPAIR EXPANSION	S	ite Improvements req	uired prior to Construction Author	rization Issuance:
Type of Structure: 65'×60'SFD	-			
Proposed Wastewater System Type: Pump To 25% red Projected Daily Flow: 360 GPD	UCTION			
Number of bedrooms: 3 Number of Occupants: 6	max			
Basement ☐Yes ► No				
Pump Required: Yes No May be required based or			0	ka c
Type of Water Supply: Community Public Well	Distance from well	teet	Permit valid for:	Five years No expiration
Permit conditions:				Mo expiration
al 1 N				
Authorized State Agent: Phi Company REHS	Date:	7-11-23	SEE AT	TACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guarantees the issuance site is subject to revocation if the site plan, plat, or the intended use changes. The Imp the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.	provement Permit shall not be affe			
C	onstruction Auth	norization		
<u></u>	province of Victor and accommo	600		
The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .19	(Required for Building		into this nermit and shall he met System	ns shall be installed in accordance
with the attached system layout.				
ISSUED TO: Carroll Construction Homes	PROPERTY L	OCATION: 60	Holly Grove Ln	
	SUBDIVISION	Shelo	h Phase 1	LOT # 6
Facility Type: 65'x60' SFD	New Expansio	n Repair		
Basement? TYes TO No Basement Fixtures?	Yes No .			
Type of Wastewater System** Pump TO 25 %	2 reduction		(Initial) Wastewater Flow	360 GPD
(See note below, if applicable)	7		(iiidai) Wastewater Flow	- 010
50% reduction	A PPBPS	Repair)		
	100	nepair)		
	of trenches /		Trench Spacing: 9	F4 C4
	gth of each trench 2		Tremen spacing.	_ Feet on Center
8	shall be installed on con	_	Soil Cover: 6	_inches
	Trench Depth of:		(Maximum soil cover shall	
(Trench b	oottoms shall be level to	+/-1/4"	36" above the trench bo	ttom)
in all dir	ections)			
Pump Requirements:ft. TDH vsGPM				inches below pipe
			Aggregate Depth:	inches above pipe
Conditions:				inches total
WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. F NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIEL		PTIC SYSTEM OR	REPAIR AREA.	
**If applicable: 1 understand the system type specified is different	t from the type specified	on the application	. I accept the specifications o	f this permit.
Owner/Legal Representative Signature:			Date:	
This Construction Authorization is subject to revocation if the site plan, plat, or the inter-	-			
Construction Authorization is subject to compliance with the provisions of the Laws and	Rules for Sewage Treatment and	Disposal and to the condit	tions of this permit.	E ATTACHED SITE SKETCH
11 11				
Authorized State Agent: Mal A RE	HS	Date:	9-11-28 Date: 9-11-28	
	Construction Authoriz	ation Expiration I	Date: 9-11-28	
	STIGHT WELLOTT AUTHORIZ	ation Expitation t		

Harnett County Department of Public Health Site Sketch

Property Location: 60 Holly Grove (A			_			
Issued To: Carroll Construction Homes Subdivision Shiloh Phose 1	Lot #	6				
Authorized State Agent: Mal REHS	Date: 9-//-23		_			
Filled in before Septic O.R. Con be finalled, To meet Setback						
DE Allians						

