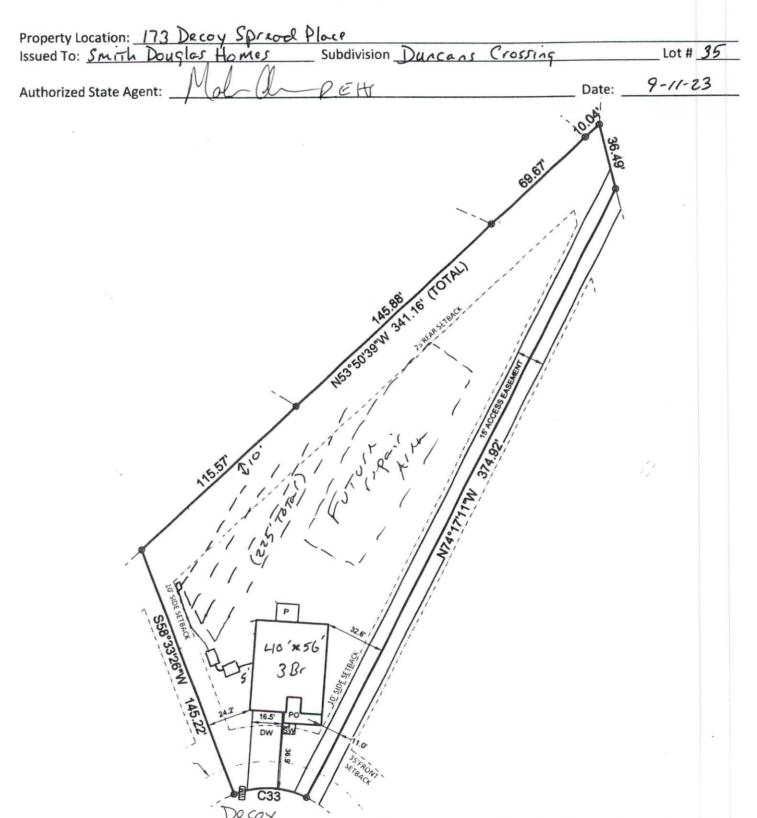
Harnett County Department of Public Health

Improvement Permit

A bu	ilding permit cannot be issued with	only an Improvement	Permit O DI	
ISSUED TO: Smith Douglas Homes	SUBDIVISION	ION: 113 Dece	crossing	LOT # 35
			ired prior to Construction Authoriz	
NEW REPAIR EXPANSION Type of Structure: 40'x56'5FD		site improvements requ	ired prior to construction Authorn	ation issuance.
Proposed Wastewater System Type: O	and water in			
Proposed Wastewater System Type: Pump TO 25% Projected Daily Flow: 360 GPD	TESTOCI ION			
Number of bedrooms: 3 Number of Occupan	ts: 6 max			
Basement Yes No	J			
	based on final location and elevat	tions of facilities		
Type of Water Supply: Community Public C			Permit valid for:	Five years
Permit conditions:				☐ No expiration
	0 - 16			
, ,	CEHT Date:			CHED SITE SKETCH
The issuance of this permit by the Health Department in no way guarantee site is subject to revocation if the site plan, plat, or the intended use chan				
the Laws and Rules for Sewage Treatment and Disposal and to conditions of		and a stange in some	and the second beautiful to the	
	Construction Aut	thorization		
	(Required for Buildin	Mari Vilv		
The construction and installation requirements of Rules .1950, .1952, .1954			one this nermit and shall be met Systems	shall be installed in accordance
with the attached system layout.				
ISSUED TO: Smith Douglas Homes	PROPERTY	LOCATION: 173	Decoy spread Pla	-Ce
Facility Type: 410'x 56' SFD			5 (1035179	LOT #
	New Expansi	ion 🔲 Repair		
Basement? Yes No Basement Fixtur				216 600
Type of Wastewater System** Pump To	25% reduction	Andrew Miles and Andrew Control	(Initial) Wastewater Flow: _	360 GPD
(See note below, if applicable)				
	25% reduction			
	Number of trenches/		0	
Septic Tank Size 1000 gallons	Exact length of each trench	223 feet	Trench Spacing:	Feet on Center
Pump Tank Size 1000 gallons	Trenches shall be installed on co		Soil Cover: 6 i	nches
	Maximum Trench Depth of:	18 inches	(Maximum soil cover shall n	ot exceed
	(Trench bottoms shall be level to	0 +/-1/4"	36" above the trench bott	om)
	in all directions)			
Pump Requirements:ft. TDH vs	GPM			inches below pipe
			Aggregate Depth:	
Conditions:			00 0	inches total
WATER LINES (INCLUDING IRRIGATION) MUST BE	THE FROM ANY PART OF S	EPTIC SYSTEM OR R	FPAIR AREA	
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DR		LITTE STSTEM OK N	LI AIN ANLA.	
NO DITLITIES ALLOWED IN INITIAL OR KETAIK DK	AIN FIELD AKEA.			
**If applicable: I understand the system type specified in	s different from the type specifie	ed on the application.	I accept the specifications of t	this permit.
Owner/Legal Representative Signature:			Date:	
This Construction Authorization is subject to revocation if the site plan, pla	t, or the intended use changes. The Construc	ction Authorization shall not b		wnership of the site, This
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.				
Authorized State Agent: Date: 9-11-23 Construction Authorization Expiration Date: 9-11-28				
Construction Authorization Expiration Date: 9-11-28				

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.