Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only an	improvement remit		
PROPERTY LOCATION:	1712 Hobson RD		
ISSUED TO: ON ANA JATINOS CHAVEZ SUBDIVISION	LOT # 2		
NEW REPAIR EXPANSION Site Impr	ovements required prior to Construction Authorization Issuance:		
Type of Structure:			
Proposed Wastewater System Type: 25% 748DXXXXD			
Projected Daily Flow: 480 GPD			
Number of bedrooms: Number of Occupants: B max			
Basement Tres No			
Pump Required: Yes No May be required based on final location and elevations of fa	cilities		
	feet Permit valid for: Five years		
Permit conditions:	■ No expiration		
Fernit Conditions.			
CALI DER RENS			
	- Z - Z 3 SEE ATTACHED SITE SKETCH		
Authorized State Agents: The issuance of this permit by the Health Department in no way guarantees the issuance of other permits. The permit holder is res			
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.	8		
Construction Authoris	ation.		
Construction Authoriza	ation.		
(Required for Building Permi	<u>t)</u>		
The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .1957, .1958, and .1959 are incorporate	ed by references into this permit and shall be met. Systems shall be installed in accordance		
with the attached system layout.			
No. To Clause	5 Mall be 20		
ISSUED TO: ONANA JATNES CLAVEZ PROPERTY LOCATION	N: 01/1/2/40030~ 193		
SUBDIVISION	LOT # <u>.3</u>		
Facility Type: New Expansion [Repair		
Basement? Yes No Basement Fixtures? Yes No			
Type of Wastewater System** 25% 708-DO COLO	(Initial) Wastewater Flow: 486 GPD		
	(initial) Wasterfater Flow.		
(See note below, if applicable)			
25% REDUCTUS (Repair)			
Installation Requirements/Conditions Number of trenches	S		
Septic Tank Size 1000 gallons Exact length of each trench 135	feet Trench Spacing: Feet on Center		
Pump Tank Size	inches (Maximum soil cover shall not exceed		
(Trench bottoms shall be level to +/-1/4	" 36" above the trench bottom)		
in all directions)	/		
Pump Requirements:ft. TDH vsGPM	inches below pipe		
	Aggregate Depth:inches above pipe		
Conditions:	Aggregate Depth:inches above pipeinches total		
CONTROL STATE OF THE STATE OF T			
WILLIAM THE CHARLES AND THE PROPERTY OF THE PROPERTY OF SECURITIES OF	ISTELL OR REPUIR AREA		
WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM ANY PART OF SEPTIC SY	STEM OR REPAIR AREA.		
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD AREA.			
**If applicable: 1 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:	Date:		
This Construction Authorization is subject to revocation if the site plan, plat, or the intended use changes. The Construction Authorization	zation shall not be transferred when there is a change in ownership of the site. This		
Construction Authorization is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal ar			
1 1 1 37148			
5 M. J. Harilbir	Day 10-1-13		
Authorized State Agent: Date: 10-2-23 Construction Authorization Expiration Date: 10-2-28			
Construction Authorization E	xpiration Date: 10-2-28		
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Application # \$\frac{1}{2309} - 0024

Harnett County Department of Public Health Site Sketch

Property Location:	Hobson	. RS			_
Issued To: ON ANA JATA	nes Charez	Subdivision		Lot # _3_	
Authorized State Agent:	pres 2	Manhar TENS	Date: _	10-2-23	
2					
	8	NEW SOLD TUPOB SULTIVE MAN AND THE SULTIVE SU			

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