## Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only an Improvement Permit		
ISSUED TO: STEPHENSON BURIDING	PROPERTY LOCATION: 500769 Rogers RS SUBDIVISION LOT #	5
NEW REPAIR EXPANSION	Site Improvements required prior to Construction Authorization Issuance:	
Type of Structure:		
Proposed Wastewater System Type: 25% REDUCTION		
Projected Daily Flow: 180 GPD  Number of bedrooms: Number of Occupants: 8	max	_
Basement Yes No	III4X	
	inal location and elevations of facilities	
Type of Water Supply: Community Public Well	Distance from well _56 — feet Permit valid for: 🗹 Five years	
Permit conditions:	No expira	tion
CMI	PAR PEHS	
Authorized State Month	Date: 11-3-23 SEE ATTACHED SITE SKETC	Н
Authorized State Agent::  The issuance of this permit by the Health Department in no way guarantees the issuance of	of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their require	
site is subject to revocation if the site plan, plat, or the intended use changes. The Improv	ement Permit shall not be affected by a change in ownership of the site. This permit is subject to compliance with the p	
the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.		
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Cor	nstruction Authorization	
	(Required for Building Permit)	
The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, with the attached system layout.	.1957, .1958, and .1959 are incorporated by references into this permit and shall be met. Systems shall be installed in a	accordance
ISSUED TO: STEPHENSON BUZICENS	PROPERTY LOCATION: 312769 ROSEAS RD	
< 0	308014131014	5_
7 11	lew Expansion Repair	
Basement? Yes No Basement Fixtures? Yes		
Type of Wastewater System** 25% TENOUTU	W SystBn (Initial) Wastewater Flow: 480	GPD
(See note below, if applicable (1) 50% 12615000	7.0) (0)	
And the state of t		
Installation Requirements/Conditions Number of	140	
,	n of each trench	
	rench Depth of: 18-20 inches (Maximum soil cover shall not exceed	
	toms shall be level to +/-1/4"  36" above the trench bottom)	
in all direct		
Pump Requirements:ft. TDH vsGPM	inches be	low pipe
rump requirements.		bove pipe
Conditions:	00 0 1 13	hes total
WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FRO	M ANY PART OF SEPTIC SYSTEM OR REPAIR AREA.	
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD		
**If applicable: I 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:	
	ed use changes. The Construction Authorization shall not be transferred when there is a change in ownership of the site.	
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.  SEE ATTACHED SITE SKETCH		
Authorized State Kent: Date: 11-3-23		
Authorized State Agent: Date: 11-3-23  Construction Authorization Expiration Date: 11-3-28		
Construction Authorization Expiration Date:		

## Harnett County Department of Public Health Site Sketch

