Harnett County Department of Public Health

Improvement Permit

A	building permit cannot be issued with only an improvement rermit
ISSUED TO: NEW HOME INC	PROPERTY LOCATION: 54 yetes M:11 Pr, Fugury Variage SUBDIVISION Wood Bridge South LOT# 2
NEW REPAIR EXPANSIO	Supplied that the supplied the supplied to the
Type of Structure: SED 40' x 72'	The improvements required prior to construction reduction southern
Proposed Wastewater System Type: 25% Red	uction Sytem
Projected Daily Flow: 480 GPD	action 3/2
Number of bedrooms: 4 Number of Occu	pants:gmax
Basement Yes No	Autor
	ired based on final location and elevations of facilities
Type of Water Supply: Community Public	☐ Well Distance from well feet Permit valid for: ☐ Five years
Permit conditions: There is to be	NO cutting or Grading of Land, No placement \[\] No expiration
of power Line or water 1	NO cutting or Grading of Land, No Placement No expiration ine on right Side of House Box.
5	and the organisation of the state of the sta
Authorized State Agent:: James []	Date: 11-50-03 SEE ATTACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guara	ntees the issuance of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This
	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 condition	ns of this permit.
	Construction Authorization
	Construction Authorization
	(Required for Building Permit)
	1954, 1955, 1956, 1957, 1958, and 1959 are incorporated by references into this permit and shall be met. Systems shall be installed in accordance
with the attached system layout.	
ISSUED TO: NEW Home Inc	PROPERTY LOCATION: 54 yates M:11 Drive Figury Var SUBDIVISION Wood Bridge South LOT # 2 New Expansion Repair
133000 10. 144-14	SUBDIVISION Wood Bridge South LOT # 2
Facility Type: SFD 40' X 72'	New D Expansion D Repair
Basement? Yes No Basement Fin	ctures? Yes No
Type of Wastewater System** 2.5% R	Transfer and the second
	Ca CCT . VII Sypto
(See note below, if applicable)	eduction System (Repair)
The second of th	Number of trenches 7
Installation Requirements/Conditions	Q
Septic Tank Size 1,000 gallons	
Pump Tank Sizegallons	Trenches shall be installed on contour at a Soil Cover:inches
	Maximum Trench Depth of: 12-718 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 vs	inches below pipe
4	Aggregate Depth:inches above pipe
Conditions: No cutting Grading of Placement on right 3:	Land, ND power Line or Water Line inches total de of House box,
	BE 10FT. FROM ANY PART OF SEPTIC SYSTEM OR REPAIR AREA.
NO UTILITIES ALLOWED IN INITIAL OR REPAIR	
NO UTILITIES ALLOWED IN INITIAL OR KETAIK	DRAIN FIELD AREA.
**If applicable: I understand the system type specifie	d is different from the type specified on the application. I accept the specifications of this permit.
Owner/Legal Representative Signature:	Date:
	plat, or the intended use changes. The Construction Authorization shall not be transferred when there is a change in ownership of the site. This
	of the Laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit. SEE ATTACHED SITE SKETCH
	5 M 1 LAX RBAS
Authorized State Agent:	Date: 11-30-23
nutivities state ngent	Construction Authorization Expiration Date: 11-30-28
//	Construction Authorization Expiration Date. 17.

Harnett County Department of Public Health Site Sketch

