

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

PROPERTY LOCATION: 1049 Cool Springs Rd

ISSUED TO: EJ Womack SUBDIVISION _____ LOT # _____

NEW REPAIR EXPANSION
Type of Structure: MAN HOME (32x76') Site Improvements required prior to Construction Authorization Issuance: _____

Proposed Wastewater System Type: CONVENTIONAL

Projected Daily Flow: 500 GPD

Number of bedrooms: 4 Number of Occupants: 8 max

Basement Yes No

Pump Required: Yes No May be required 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: _____ No expiration

Authorized State Agent: [Signature] REHS Date: 10/1/18 SEE ATTACHED SITE SKETCH

The issuance of this permit by the Health Department in no way guarantees the issuance of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This 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.

Construction Authorization

(Required for Building Permit)

The construction and installation requirements of Rules .1950, .1952, .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: EJ Womack PROPERTY LOCATION: 1049 Cool Springs Rd

Facility Type: MAN HOME (32x76') New Expansion Repair

Basement? Yes No Basement Fixtures? Yes No

Type of Wastewater System** CONVENTIONAL (Initial) Wastewater Flow: 480 GPD

(See note below, if applicable) CONVENTIONAL (Repair)

Installation Requirements/Conditions	Number of trenches <u>1</u>	
Septic Tank Size <u>1000</u> gallons	Exact length of each trench <u>533</u> feet	Trench Spacing: <u>9</u> Feet on Center
Pump Tank Size _____ gallons	Trenches shall be installed on contour at a Maximum Trench Depth of: <u>18-30</u> inches	Soil Cover: <u>6-18</u> inches
	(Trench bottoms shall be level to +/-1/4" in all directions)	(Maximum soil cover shall not exceed 36" above the trench bottom)

Pump Requirements: _____ ft. TDH vs. _____ GPM _____ inches below pipe
Aggregate Depth: _____ inches above pipe
Conditions: _____ inches total

**WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM ANY PART OF SEPTIC SYSTEM OR REPAIR AREA.
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD AREA.**

**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: _____

This Construction Authorization is subject to revocation if the site plan, plat, or the intended use changes. The Construction Authorization 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 and to the conditions of this permit. SEE ATTACHED SITE SKETCH

Authorized State Agent: [Signature] REHS Date: 10/1/18
Construction Authorization Expiration Date: 10/1/23

HTE# BRES1809-0018

Permit # 30219

Harnett County Department of Public Health Site Sketch

ISSUED TO: EJ NOMALX PROPERTY LOCATOR: 1049 COOL SPRINGS RD
SUBDIVISION _____ LOT # _____

Authorized State Agent: ~~OLIVER TOLKSDOTT~~ Date: 10/1/18



