30535

## HTE# BRES 1903-00 Harnett County Department of Public Health

## Improvement Permit

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: Hwy 42 SUBDIVISION NEW EXPANSION Site Improvements required prior to Construction Authorization Issuance: EX SFD Proposed Wastewater System Type: 2500 Roduction Projected Daily Flow: 240 GPD Number of Occupants: Y max Number of bedrooms: Basement Yes May be required based on final location and elevations of facilities Pump Required: ☐Yes ☐ No Permit valid for: Permit conditions: ■ No expiration Authorized State Agent:

Date: 7-17-15

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 Facility Type: Repair

PROPERTY LOCATION: Hung 42

SUBDIVISION Repair Basement? Yes Type of Wastewater System\*\* (Initial) Wastewater Flow: 240 GPD (See note below, if applicable 

) Installation Requirements/Conditions Number of trenches \_\_\_\_\_\_ Z Exact length of each trench 80 feet Trench Spacing: 9 Feet on Center Trenches shall be installed on contour at a Soil Cover: 6 inches Septic Tank Size Fy gallons Pump Tank Size \_\_\_\_\_ gallons Maximum Trench Depth of: ZY" 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. GPM Conditions: 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: 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: Construction Authorization Expiration Date: 7-17-24

## Harnett County Department of Public Health Site Sketch

ISSUED TO: TDT CONSTRUCTION FAC	PROPERTY LOCATON: Ho	wy 42	LOT #
Authorized State Agent: The EMANKA	to fee 12845	Date:	7-17-19
* Follow Consollants a			
& MANTALEISA Repu Be followed who	exemption of Per	amitted Bi	106, All Rules must
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