HTE#1 3-5- 32(85

## Harnett County Department of Public Health

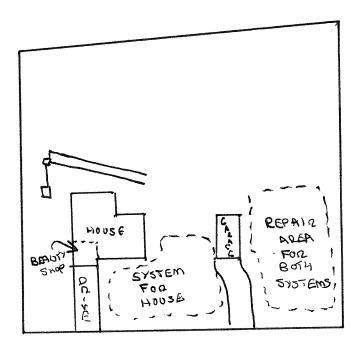
27787

Improvement Permit

A building permit cann	De issued with only an improvement	s Creek Forms Lox 46
ISSUED TO: BARRY EADIE		PREEK FARMS LOT # 46
NEW REPAIR □ EXPANSION □		equired prior to Construction Authorization Issuance:
Type of Structure: BEAUTY SHOP (2 CHAIRS)	· •	1
Proposed Wastewater System Type: 25% REDUCTION	• • • • • • • • • • • • • • • • • • • •	
Projected Daily Flow: 250 GPD	<u></u>	
Number of bedrooms: Number of Occupants:	ax	
Basement 🗆 Yes 🔀 No		
Pump Required: □Yes No □ May be required based on final lo		
Type of Water Supply:  Community  Permit conditions:	from well 100 feet	Permit valid for: Five years  ———————————————————————————————————
Authorized State Agent::	Lilida	CFF ATTACHED CITE CUTTON
Authorized State Agent::  The issuance of this permit by the Health Department in no way guarantees the issuance of the second o	Date: 211114	SEE ATTACHED SITE SKETCH
site is subject to revocation if the site plan, plat, or the intended use changes. The Improvement the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit		
Constru	ction Authorization	
	red for Building Permit)	
The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .1957, with the attached system layout.	158. and .1959 are incorporated by references	into this permit and shall be met. Systems shall be installed in accordance
ISSUED TO: BASES EADIE	PROPERTY LOCATION:	
Facility Type: BEAUTY SMOP (2 CHANTS) X New	SUBDIVISION CHORESS	
	☐ Expansion ☐ Repair	
	X No	<b>△</b> == →
Type of Wastewater System** 25% REDUCTION	DYSTEM	(Initial) Wastewater Flow: 250 GPD
(See note below, if applicable $\square$ )	`	
Pump To 25% RGO	_ ` '	
Installation Requirements/Conditions Number of trench		C
•	th trench 70 feet	Trench Spacing: Feet on Center
	nstalled on contour at a	Soil Cover: inches
Maximum Trench		(Maximum soil cover shall not exceed
(Trench bottoms	all be level to +/-1/4"	36" above the trench bottom)
in all directions)		·
Pump Requirements:ft. TDH vs GPM		inches below pipe
	- ~	Aggregate Denth: inches above nine
Conditions: ALL WATER FROM SHOP MUS	r Be Directed	inches total
THIS SYSTEM.		
WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM AN NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD AREA	PART OF SEPTIC SYSTEM OR	REPAIR AREA.
**If applicable: I understand the system type specified is different from to	type specified on the application	1. I accept the specifications of this permit.
Owner/Legal Representative Signature:		Date:
This Construction Autho <del>rization is subject</del> to revocation if the site plan, plat, or the intended use c		· · · · · · · · · · · · · · · · · · ·
Construction Authorization is subject to compliance with the provisions of the Laws and Rules for S	age Treatment and Disposal and to the condit	tions of this permit. SEE ATTACHED SITE SKETCH
		-1 )
Authorized State Agent:	Date:	3 × 14
Constr	ction Authorization Expiration I	Date: 1 12 19

## Harnett County Department of Public Health Site Sketch

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ISSUED TO: DENCEY LEO I SUBDI	ISION CYPRESS CREEK FARMS LOT #	46
Authorized State Agent:	2 FOLKSOOP Date: 2/11/14	



CHPRESS CREEK FARM RO