

HTE# CAAC15-5-36489

Harnett County Department of Public Health

30206

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

PROPERTY LOCATION: 150 MARKS RD

ISSUED TO: ARNOLD HOLOEN SUBDIVISION _____ LOT # _____

NEW REPAIR EXPANSION Site Improvements required prior to Construction Authorization Issuance: _____

Type of Structure: CHURCH AUDITORIUM (108 SEATS)

Proposed Wastewater System Type: CONVENTIONAL

Projected Daily Flow: 702 GPD TOTAL

Number of bedrooms: _____ Number of Occupants: 54 MEMBER CHURCH

Basement Yes No 108 SEAT AUDITORIUM

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
 No expiration

Permit conditions: _____

Authorized State Agent: [Signature] Date: 8/14/18 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: ARNOLD HOLOEN PROPERTY LOCATION: 150 MARKS RD

SUBDIVISION _____ LOT # _____

Facility Type: CHURCH AUDITORIUM New Expansion Repair

Basement? Yes No Basement Fixtures? Yes No

Type of Wastewater System** CONVENTIONAL (Initial) Wastewater Flow: 702 GPD TOTAL

(See note below, if applicable CONVENTIONAL (Repair)

Installation Requirements/Conditions

Septic Tank Size 1500 gallons Number of trenches 3

Pump Tank Size _____ gallons Exact length of each trench 100 feet Trench Spacing: 9 Feet on Center

Trenches shall be installed on contour at a Soil Cover: 24 inches

Maximum Trench Depth of: 36 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 _____ inches below pipe

Aggregate Depth: _____ inches above pipe

Conditions: SEE SITE SKETCH FOR DETAILS _____ 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] Date: 8/14/18

Construction Authorization Expiration Date: 8/24/23

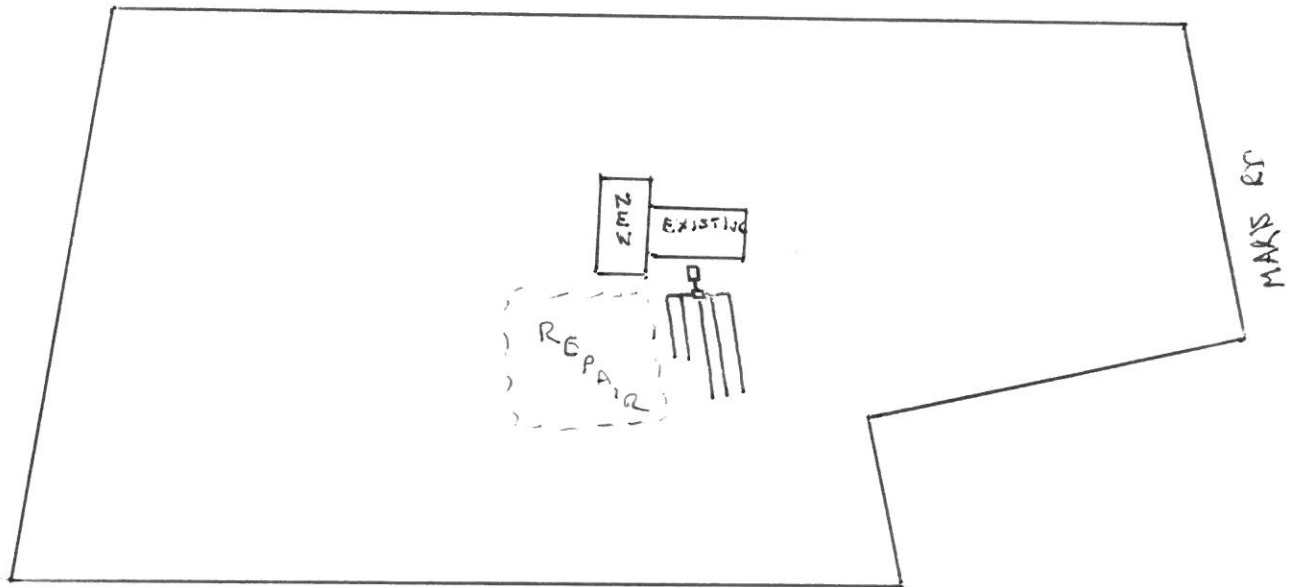
HTE# CARCIS-5-36489

Permit # 30206

Harnett County Department of Public Health Site Sketch

ISSUED TO: ARNOLD HOLOEN PROPERTY LOCATOR: 150 MARKS RD
SUBDIVISION _____ LOT # _____

Authorized State Agent: ~~REHS (OLIVER TOLKSDORF)~~ Date: 8/14/14



- * CRUSH EXISTING TANK. REPLACE W/ 1500 gal TANK
- * CONNECT 2 EXISTING LINES INTO ONE LINE
- * ADD 3 NEW 100' LINES
- * CALL WITH ANY QUESTIONS PRIOR TO INSTALLATION

