HTE#17-5-41112R

Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only an Improvement Permit	
ISSUED TO: SOLID KOCKUNISGONGTH. GA. SUBDIVISION	LOT #
NEW REPAIR EXPANSION Kite Improvements required prior to Construction Authoriza Type of Structure: Ext. Saucium Kite Concent	ution Issuance:
Proposed Wastewater System Type: Ex 155 19 G	
Projected Daily Flow: 750 GPD 150 menusion	
Number of bedrooms: Number of Occupants:max	
Basement Yes XNo	
Pump Required: 🕅 Kes 🔲 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: SYSTEM TO SERVE KITCHEN ONLY	\square No expiration
11 m	
Authorized State Agent:: CGHS Date: 5/3/17 SEE ATTACK	HED SITE SKETCH
The issuance of this permit by the Health Department in no way guarantees the buyance of other permits. The permit holder is responsible for checking with appropriate appropriate buyance of the permits and the second se	
she 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 com-	npliance 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: SOLIO ROCL UNITED 1	MEXIA, CAN. PROPERTY LOCATION:	NC24 WEST	
14	SUBDIVISION		LOT #
Facility Type: KITCHEN	New 🛛 Expansion 🗆 Re	epair	
Basement? 🗌 Yes 🔀 No 🛛 Basement Fiz	xtures? 🗆 Yes 🔀 No		
Type of Wastewater System** _ Exist.	A	(Initial) Wastewa	iter Flow: 756 GPD
(See note below, if applicable)		(IIIII) Hubicina	
Pump Jo	25%, RED, 575, (Repair)		
Installation Requirements/Conditions	Number of trenches EXISSIN 6		
Septic Tank Size 1500 gallons	Exact length of each trench fe	et Trench Spacing	Feet on Center
Pump Tank Size 1000 gallons	Trenches shall be installed on contour at a	Soil Cover:	
GREASE TOR 1000 Julions	Maximum Trench Depth of: inc		ver shall not exceed
6	(Trench bottoms shall be level to +/-1/4"	36" above the t	
	in all directions)	so above the t	
Pump Requirements:ft. TDH vs			inches holow nine
· · · · · · · · · · · · · · · · · · ·		Aggragata Dapth:	inches below pipe
Conditions: SYSTEN TO SERVE	KITCHENI ONDI	Aggregate Depth:	
			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	ion. 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 no	ot 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 com-	ditions of this permit. SEE ATTACHED SITE SKETCH
li. I de	5/3/17

