HTE# 08-5-19383

Harnett County Department of Public nealth 24528

Improvement Permit

A	building permit cannot be issued	with only an Improvement OCATION: ABATION		
ISSUED TO: RAYMOND COATS -		CURRIN/ TUR		LOT # 10
NEW ☑ REPAIR □ EXPANSIO			uired prior to Construction Autho	
Type of Structure: SFO (43×33) Existing				
Proposed Wastewater System Type: Exist. Conv.	DERINLINE			
Projected Daily Flow: 240 GPD	tı.			
Number of bedrooms: 2 Number of Occu	pants:max			
Basement □Yes No Pump Required: □Yes KNo □ May be requ	ired based on final location and e	levations of facilities		
Pump Required: 🗆 Yes 🔑 No 🗀 May be requ Type of Water Supply: 🗆 Community 🗀 Public Permit conditions:			Permit valid for:	Five years No expiration
Authorized State Agent:: The issuance of this permit by the Health Department in no was their requirements. This site is subject to revocation if the site	ay guarantees the issuance of other pe	e: 220/08 ermits. The permit holder is re-	sponsible for checking with appropria	TTACHED SITE SKETCH ate governing bodies in meeting
permit is subject to compliance with the provisions of the Laws				
	Construction	Authorization		
	(Required for B			
The construction and installation requirements of Rules .1950, installed in accordance with the attached system layout. ISSUED TO: Remond Comes	.1952, .1954, .1955, .1956, .1957, .19 Sa	RTY LOCATION: Ps	mon Ro	d shall be met. Systems shall be
	SUBDI	VISION CURRY/	TURLINGTON	LOT # _\O
Facility Type: Existing SFD	🗵 New 🗆 Ex	pansion 🗌 Repair		
	xtures? 🗆 Yes 🔀 No		•	
Type of Wastewater System** Exerne Ce	DNVENTIONAL (Initial)	Wastewater Flow: _	240 GPD	
(See note below, if applicable \square)	LINE			
and the same of th	JANOV	(Repair)		
Installation Requirements/Conditions	_			
		57176		
Septic Tank Size 1000 gallons	Exact length of each trench			
Pump Tank Size gallons	Trenches shall be installed of		Soil Cover:	- 1. C. 1. (1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
			(Maximum soil cover shall	
	(Trench bottoms shall be lev	vel to +/-1/4	36" above the trench be	ottom)
D. D	in all directions)			inches helew nine
Pump Requirements:ft. TDH vs	GPM		Aggregate Depth:	inches below pipe
Conditions: ADD APPROUVED TANK	To System		Aggregate Deptil.	inches above pipe inches total
**If applicable: I understand the system is	type specified is different from	the type specified on the	application. I accept the spec	cifications of this permit.
Owner/Legal Representative Signature:			Date:	
This Construction Authorization is sobject to revocation if the s	tite plan plat or the intended use ch	anges The Construction Author	ization shall not be transferred when	there is a change in ownership
of the site. This Construction Authorization is subject to complete	ance with the provisions of the Laws	and Rules for Sewage Treatmer	nt and Disposal and to the condition	is of this permit. ATTACHED SITE SKETCH
Authorized State Agent:	es Ma	Date:	2)20/08	MINCHED SHE SKEICH
-	Construction Au	thorization Expiration I)ate: 220 13	

Harnett County Department of Public Health Site Sketch

	C -	PROPERTY LOCATON:	ABATTOR RD	
ISSUED TO: RAYM	ONO COATS JO	SUBDIVISION _	CURRIN TORLINGTON	LOT # 10
Authorized State Agent:		es (OLIVER TOU	<u> </u>	08
		,		
		150		
		CON	NVENTIONAL) AIR AREA	
			SET NEW TANK	
	513	=	580	
	9.0			
		EXIST.		
	·	HOUSE		
	10		٥	
			0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	