HTE# 08 - 5 - 209 54

Harnett County Department of Public Health

24843

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

PROPERTY LOCATION: HWG 55 SUBDIVISION ____ ISSUED TO: Cherye Poole STAILINGS
NEW - REPAIR - EXPANSION -Site Improvements required prior to Construction Authorization Issuance: Type of Structure: Add = trons to SFD Proposed Wastewater System Type: Exis trace Sus to Projected Daily Flow: 480 Number of bedrooms: Number of Occupants: 8 max Basement TYes May be required based on final location and elevations of facilities Pump Required: ☐Yes ☐ No Type of Water Supply:
Community Public Well Distance from well feet Permit valid for: Five years Permit conditions: ☐ No expiration Authorized State Agent Manhart & Date: 9-30-08

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: Chenge Poole STAIITNGS PROPERTY LOCATION: How 55

New Expansion Repair LOT # Basement Fixtures?
Yes No

Fixes France (Initial) Wastewater Flow: 480 GPD Basement? Yes No Basement Fixtures? Yes Type of Wastewater System** (See note below, if applicable) Installation Requirements/Conditions NCW Number of trenches EX Septic Tank Size 1200 gallons Exact length of each trench ExTrench Spacing: _____ Feet on Center Pump Tank Size _____ gallons Trenches shall be installed on contour at a Soil Cover: — inches Maximum Trench Depth of: (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 inches above pipe Conditions: NEW TANK + DBOX INSTALL TO
EXESTENX, CINES **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: Date: Construction Authorization Expiration Date: 9-30-13

Harnett County Department of Public Health Site Sketch

PROPERTY LOCATON: Hay 55	
ISSUED TO: Chenye Pools STALIENGS SUBDIVISION	_ LOT #
Authorized State Agents James & Manhant one Date: 9-30-08	
* SET NEW 1200 GAT TANK	
* 5'off of Foundation Exactly	
* SET NEW D-BOX AND RECONNECT	
to EXISTING DIATN CINES,	
* D-BOX TO BE 5' off Foodstion. 400'	
Siff RW Etgo	
Ker Land	
140	
EXISTENS 30' ROAD ESMT.	