HTE# 14-5-34327 Harrent County Department of Public County 28063 for home system lay out suilding permit cannot be issued with only an Improvement Permit PROPERTY LOCATION SUBDIVISION

NEW REPAIR

Improvement Permit PROPERTY LOCATION SUBDIVISION

SUBDIVISION

SUBDIVISION PROPERTY LOCATION DC/DOZ Winhele PS Site Improvements required prior to Construction Authorization Issuance: Type of Structure: Det Gange + 2.32 + Poul Proposed Wastewater System Type: 25% TVB-NU TUN Projected Daily Flow: Number of Occupants: 4 max Number of bedrooms: Basement Yes 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 Five years Permit valid for: ■ No expiration Permit conditions: 8-20-14 Date: 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 4-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: Christopher Hall

PROPERTY LOCATION: Se 1502 Wenderly 1215

CHADINGTON

LOT # Facility Type: Det Connec + 213 - New Expansion Repair Basement? Yes No Basement Fixtures? Yes No Type of Wastewater System** 25% Notice 545 GPD (See note below, if applicable Number of trenches ______Z Installation Requirements/Conditions Exact length of each trench 100 feet Trench Spacing: _____ Feet on Center Septic Tank Size 1000 gallons Trenches shall be installed on contour at a Pump Tank Size _____ gallons Maximum Trench Depth of: 29 marinches (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. ____ Aggregate Depth: 2 inches above pipe Conditions: 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: 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: 8-20-14

Construction Authorization Expiration Date: 8-20-14

HTE# 14-5-34327

Permit # 28063

Harnett County Department of Public Health Site Sketch

Authorized State Agent:	Jaes & Man	PROPERTY LOCATON: SC 150 SUBDIVISION SLOVE frigueness	/	LOT
of the state of th	115	Pup to 25% Report	D 287AT Z CANACE Z	72'

3R1502 Winberty RA