HTE# REPAIR

Har t County Department of Public ealth

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

28639

	PROPERTY LOC	ATION: 88 WILD FOR	DEST LN	
ISSUED TO: STEVE & DENISE	SCALEOUS SUBDINISION	WILD FOREST MY	AP LOT #	
	SION	Site Improvements required prior	to Construction Authorization Issuance:	
Type of Structure:				
Proposed Wastewater System Type: Existing C				
Projected Daily Flow: GPD				
Number of bedrooms: Number of Occ	cupants:max			
Basement				
	quired based on final location and ele			
Type of Water Supply: Community Public	☐ Well Distance from well _	100 feet	Permit valid for: Five years	
Permit conditions:			No expiration	a
		.1.)./		
Authorized State Agent::	100	1 14 16	SEE ATTACHED SITE SKETCH	
The issuance of this permit by the Health Department in no way gusite is subject to revocation if the site plan, plat, or the intended us the Laws and Rules for Sewage Treatment and Disposal and to condi-	e changes. The Improvement Permit shall not b			
	Construction A	uthorization		
	(Required for Bui	ding Permit)		
The construction and installation requirements of Rules .1950, .1952, with the attached system layout.	.1954, .1955, .1956, .1957, .1958. and .1959	are incorporated by references into this perm	it and shall be met. Systems shall be installed in according	rdance
ISSUED TO: STEVE & DENISE	SCAFFUED PROPER	TY LOCATION: 88 WILD F	ORES. LN	<u> </u>
		SION WILD FOREST	MITP LOT #	
Facility Type:		nsion 🗆 Repair		
Basement? Yes No Basement	Fixtures? Tes No			
Type of Wastewater System**		(Initia	I) Wastewater Flow: G	GPD
(See note below, if applicable □)				
<u></u>		(Repair)		
Installation Requirements/Conditions	Number of trenches			
Septic Tank Size gallons	Exact length of each trench		pacing: Feet on Center	
Pump Tank Size 3000 gallons	Trenches shall be installed on		er: inches	
0	Maximum Trench Depth of: _		num soil cover shall not exceed	
	(Trench bottoms shall be leve		above the trench bottom)	
	in all directions)			
Pump Requirements:ft. TDH vs	CDM		inches below	w nine
Tump requirements.	0111	Aggraga	to Danth: inches above	ve nine
Conditions: CONTRACTUR TO	CONSACT HCH	D PRIOR TO ABBIEGA	inche	es total
REPLACING TANK				
Conditions:	T BE 1 <mark>0ft. From any part of</mark> R Drain Field Area.	SEPTIC SYSTEM OR REPAIR AI	REA.	
**If applicable: / understand the system type special				
Owner/Legal Representative Signature:			Date:	
This Construction Authorization is subject to revocation if the site plants				
Construction Authorization is subject to compliance with the provision	ns of the Laws and Rules for Sewage Treatment	and Disposal and to the conditions of this pe	ermit. SEE ATTACHED SITE SKI	EICH
Authorized State Agent:	Many .	Date:) 14	76	
	Construction Auth	orization Expiration Date:	114/24	

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HTE#	KEPAIR

Permit # <u>2863 9</u>

Harnett County Department of Public Health Site Sketch

ISSUED TO: STELL DENSE STAFFORD SUBDIVISION WILD FOREST LN Authorized State Agent: Date: 174 16				
		125 WH IN BURK		
		TANK PANK		
	MILE			
	WILD FUNESS			
	7 2			