HTE# <u>12-5-28187</u> Harnett County Department of Public Health

Improvement Permit

26816

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: Hour 82 ISSUED TO: John Manshall Grees on REPAIR D EXPANSION D PROPERTY LOCATI LOT # Site Improvements required prior to Construction Authorization Issuance: DWMH Type of Structure: Proposed Wastewater System Type: 25% 125-200000 Projected Daily Flow: 360 GPD Number of Occupants: ______ max Number of bedrooms: 🛛 🍕 IN No Basement Yes May be required based on final location and elevations of facilities Pump Required:
Yes I No Type of Water Supply: 🗆 Community 🗹 Public 🗹 Well Distance from well 😏 🐔 feet Five years Permit valid for: Permit conditions: □ No expiration 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: John Manshall Gregory Diamity PROPERTY LOCATION: Harry SZ SUBDIVISION Expansion Repair LOT # 🗹 New No No Basement Fixtures? 💭 Yes Basement? 🗌 Yes 🖸 No _____ (Initial) Wastewater Flow: <u>360</u>____ GPD 15%, REDUCTUD SUSTIS Type of Wastewater System** (See note below, if applicable) 5% AREDUCROD Statem (Repair) Number of trenches 3Installation Requirements/Conditions
 Number of trenches

 Exact length of each trench

 feet
 Trench Spacing:

 Feet on Center

 Soil Cover:

 Septic Tank Size 1000 gallons Pump Tank Size _____ gallons Maximum Trench Depth of: 28-718 inches (Maximum soil cover shall not exceed (Trench bottoms shall be level to +/-1/4" 36" above the trench bottom) in all directions) Aggregate Depth: <u>2</u> inches below pipe <u>12</u> inches above pipe Pump Requirements: ______ft. TDH vs. _____ GPM 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.

Date:

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:	HE FERS Date:	/	24-12	
	Construction Authorization Expiration I	Date:	1-21-17	

HTE# <u>12-5-28187</u>	Permit #26816				
Harnett County Department		lic Health			
Site Sketch					
ISSUED TO: John Marshall Gregony Jrc SUBDIVISION	82	LOT #			
PROPERTY LOCATON: Howy ISSUED TO: John Muzshall Gregony Jrc SUBDIVISION Authorized State Agent: Janes & Manhant III 126115	Date:	1-24-12			
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