

HTE# 07-50016978 Harnett County Department of Public Health 23823

### Improvement Permit

A building permit cannot be issued with only an Improvement Permit

ISSUED TO: Murchison Home PROPERTY LOCATION: 1107  
 NEW  REPAIR  EXPANSION  SUBDIVISION: Atkins Corner LOT # 4  
 Type of Structure: MOB 28x66 Site Improvements required prior to Construction Authorization Issuance:  
 Proposed Wastewater System Type: existing system  
 Projected Daily Flow: 360 GPD  
 Number of bedrooms: 3 Number of Occupants: 6 max  
 Basement  Yes  No  
 Pump Required:  Yes  No  May be required based on final location and elevations of facilities  
 Type of Water Supply:  Community  Public  Well Distance from well \_\_\_\_\_ feet Permit valid for:  Five years  
 Permit conditions: meet on-site Replaced damaged Septic Tank & Box  No expiration

Authorized State Agent: [Signature] Date: 032307 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: Murchison Home PROPERTY LOCATION: 1107  
 SUBDIVISION: Atkins Corner LOT # 4  
 Facility Type: MOB  New  Expansion  Repair  
 Basement?  Yes  No Basement Fixtures?  Yes  No  
 Type of Wastewater System\*\* existing (Initial) Wastewater Flow: \_\_\_\_\_ GPD  
 (See note below, if applicable  exist (Repair))

#### Installation Requirements/Conditions

Septic Tank Size 1000 gallons Exact length of each trench \_\_\_\_\_ feet Trench Spacing: \_\_\_\_\_ Feet on Center  
 Pump Tank Size 1000 gallons Trenches shall be installed on contour at a Soil Cover: \_\_\_\_\_ inches  
 Maximum Trench Depth of: \_\_\_\_\_ inches (Maximum soil cover shall not exceed 36" above the trench bottom)  
 (Trench bottoms shall be level to +/- 1/4" in all directions)  
 Pump Requirements: \_\_\_\_\_ ft. TDH vs. \_\_\_\_\_ GPM \_\_\_\_\_ inches below pipe  
 Aggregate Depth: \_\_\_\_\_ inches above pipe  
 Conditions: \_\_\_\_\_ inches total

\*\*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: \_\_\_\_\_ 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.

Authorized State Agent: [Signature] Date: 03-29-07 SEE ATTACHED SITE SKETCH  
 Construction Authorization Expiration Date: 03-29-2012

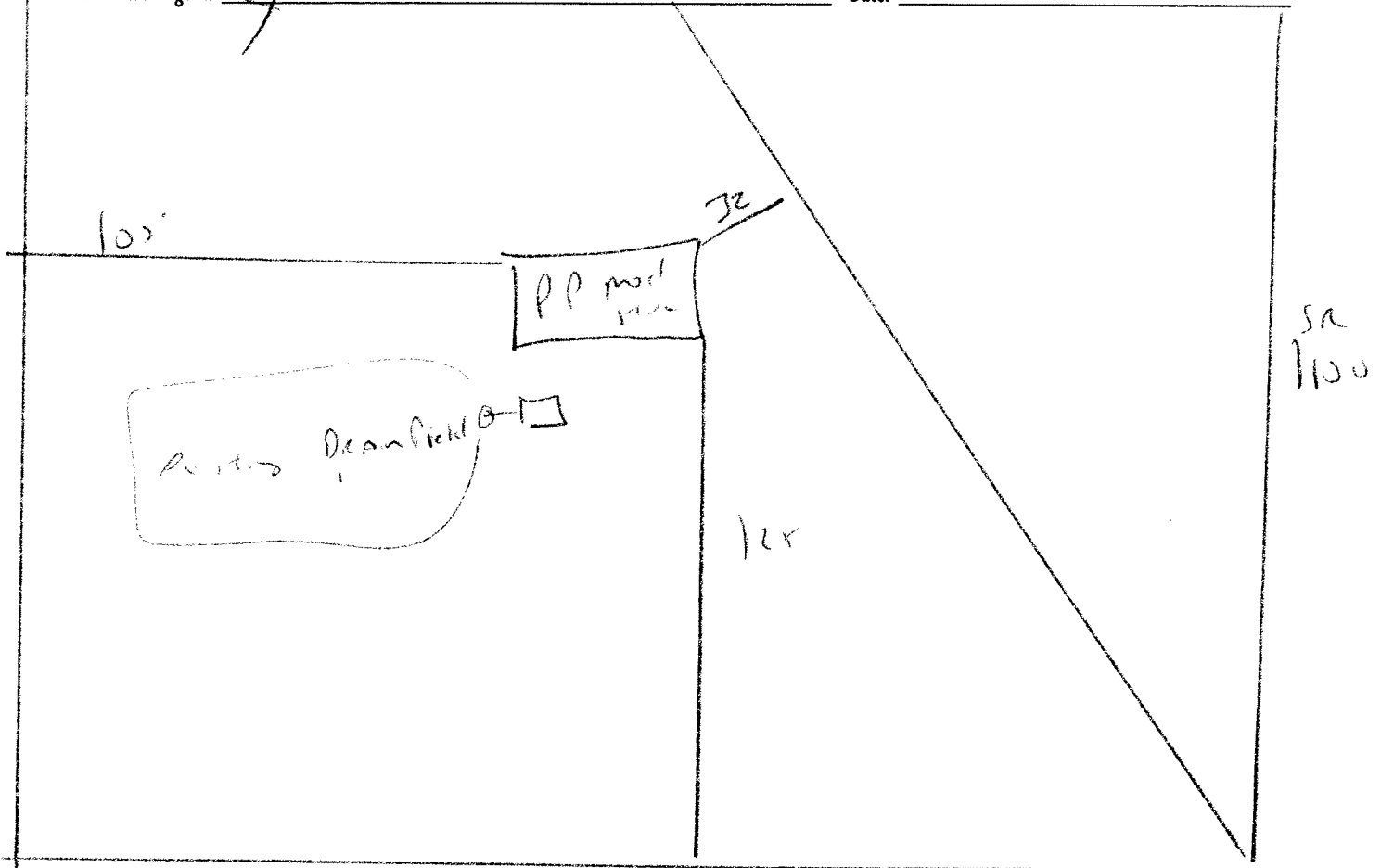
HTE# 07-50016978

Permit # 23827

# Harnett County Department of Public Health Site Sketch

ISSUED TO: A. Marchion PROPERTY LOCATOR: 1107  
SUBDIVISION: Atkins SPAIR LOT # 4

Authorized State Agent: J. L. ... Date: 072907



SA 1107

Replace damaged ~~at~~ Septic Tank & D Box  
Meet onsite

Do not Drive or park on Septic system