HTE# Repair

Har t County Department of Public ealth

28446

Improvement Permit

	A building permit cannot be issued with	h only an Improvement P	ermit		
ISSUED TO: First Troy	PROPERTY LOCA SUBDIVISION	TION: 120 High	alau	LOT #	3
- 1			ired prior to Construction Au		
NEW REPAIR F EXISTING Home	PANSION	site improvements requi	red prior to construction Ac	Milonzation issuance.	
Proposed Wastewater System Type: 25 7. L	eduction 5,5ton				
Projected Daily Flow: 480 GPD	ed of state				
Number of bedrooms: 4 Number of	f Occupants: 8 max				
Basement 🗆 Yes 🖾 No					
/	e required based on final location and eleva	ations of facilities			
	ıblic Well Distance from well	feet	Permit valid for	r: 1 y /- Five years No expirat	
	6	. 1			
11:15:15 /G. MS	wain CEH Date: _	12/7/2015	CEI	E ATTACHED SITE SKETCH	
Authorized State Agent:: The issuance of this permit by the Health Department in no wasite is subject to revocation if the site plan, plat, or the intend the Laws and Rules for Sewage Treatment and Disposal and to	ay guarantees the issuance of other permits. The permit led use changes. The Improvement Permit shall not be	t holder is responsible for check	king with appropriate governing boo	dies in meeting their requirem	nents. This
	Construction Au	thorization			
	(Required for Build				
The construction and installation requirements of Rules .1950, . with the attached system layout.					
ISSUED TO: First Tray Facility Type: Existing Hom	PROPERT	Y LOCATION: 120	Highfield L	м.	
133020 10.	SUBDIVISI	ON Johns	Faireloth	LOT #	3
Facility Type: Evicting Home	e New Fynan	sion Renair			
Facility Type: Existing Hom Basement? Types No Baseme	ent Fixtures? Yes No	sion E nepan			
Type of Wastewater System**			(Initial) Wastewater F	low: 4/80	GPD
			_ (IIIIIai) Wastewater 1	1011.	GI D
(See note below, if applicable □)	ledution System	(Ranair)			
	Number of trenches/	(перап)			
Installation Requirements/Conditions	Exact length of each trench 4	K-60 600	Trench Spacing: 9	Foot on Contor	
Septic Tank Size Exiting gallons	The same of the sa	contour of o	Soil Cover: 6	inches	
Pump Tank Size gallons	Trenches shall be installed on o				
	Maximum Trench Depth of:		(Maximum soil cover s		
	(Trench bottoms shall be level	to +/-1/4	36" above the trench	i bottom)	
	in all directions)				
Pump Requirements:ft. TDH vs.	GPM			inches be	
-1 5 1 10.1	off. of drainfield: the amount that	100-01-1	Aggregate Depth:		bove pipe
Conditions: The Tirst 40.6	oft. of drantield.) Crushed. A	taci		thes total
othe end of the line	the amount that	is crushed. I	.tsystentouls	anew drain	7.014
WATER LINES (INCLUDING IRRIGATION) A NO UTILITIES ALLOWED IN INITIAL OR RE	MUSI BE TUFT. FROM ANT PART OF	SEPTIC SYSTEM OR R	EPAIR AREA.	55115()	cyonre
**If applicable: / understand the system type s	energical is different from the type specified	fied on the application	I accent the specification	os of this permit	
	became is unievent from the type speen	red on the application.	r accept the specimeation	s or this perime	
Owner/Legal Representative Signature:			Date:		
This Construction Authorization is subject to revocation if the s	its plan plat or the intended use changes. The Constr	ruction Authorization shall not h		age in ownership of the site.	This
Construction Authorization is subject to revocation in the s				SEE ATTACHED SITE	
The property of the property o			, ,		
Authorized State Agent:	Musin REHI	Date: _	12/7/2015		
	Construction Author	orization Expiration Da	ate:/2/7/20/6		

	D	
HTE#	Lepair	

Permit # 28446

Harnett County Department of Public Health Site Sketch

~	PROPERTY LOCATON:	120 High-	Field Ln.		
ISSUED TO: First Troy	SUBDIVISION	Johnny Fair	cloth	LOT #	3
Authorized State Agent: Working		-	12/7/2015	_	
Authorized State Agent	N. D	Date	10/1/20		

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High Field La.