HTE# 11-5-27983

Harnest County Department of Public nealth

Improvement Permit

26805

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: Sec 15 40 Montague (D) SUBDIVISION Site Improvements required prior to Construction Authorization Issuance: Type of Structure: Modulma Proposed Wastewater System Type: 25% REDUCTUD Projected Daily Flow: 480 Number of Occupants: 8 Number of bedrooms: Basement Yes May be required based on final location and elevations of facilities ☐ No Pump Required: Tes Type of Water Supply:

Community Public Well Distance from well feet Permit valid for: ■ No expiration Permit conditions: SEE ATTACHED SITE SKETCH Authorized State Agent:: 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. PROPERTY LOCATION: SIC 1540 Montage as ISSUED TO: EARL R BUTZ Expansion Repair (Initial) Wastewater Flow: 480 Type of Wastewater System** 25% Reduction System (See note below, if applicable

) 27 pricke to 25% REDUCURREPAIR) Number of trenches 4 on 3 Installation Requirements/Conditions Exact length of each trench 80-100 feet Trench Spacing: 7 Feet on Center Septic Tank Size 1700 gallons Pump Tank Size gallons Soil Cover: Trenches shall be installed on contour at a Maximum Trench Depth of: 24 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: Z inches above pipe Pump Requirements: _____ft. TDH vs. 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 SEE ATTACHED SITE SKETCH 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. Date: 12-8-11 Authorized State Agent:

Harnett County Department of Public Health Site Sketch

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