HTE# 13-5-31284

Harnett County Department of Public Health

Improvement Permit

27391

ISUED TO: Sharnes A Meleccent + SUBDIVISION	A			only an Improvement	Permit Bethel CHuna	4 20
NEW IS instructive: NEPAR ISON ISON ISON ISON ISON ISON ISON ISON	ISSUED TO: Shanon A MERLE	8 s				
Type of Structure:					uired prior to Construction	
Projected Daily Flow: 480 GPD Number of bedrooms: 4 Number of Occupant: 8 max Basement Prove I'No May be required based on final location and elevations of facilities Permit valid for: Five years Permit conditions:	Type of Structure: mon			•		
Projected Daily Flow: 480 GPD Number of bedronns: 4 Number of Occupant: 8 Pump Required: Or Set Occupant: 8 max Basement Or Set Occupant: 8 max Permit conditions: Or May-be required based on final location and elevations of facilities Permit valid for: Fire years Permit conditions: Community Public Well Distance from well feet Authorized State Aged: Community Public Date: 5 -23 -13 SEE ATTACHED SITE SKETCH The issued of the set hand bus destination new parametes the itizance of other preminits. The permit indefer is responsible for checking with approprinte generating basic in meeting their requirements. This is in adject to inmediate their requirements. This is in adject to conditions of their plane, with the previous of the last and plane to conditions of the previous of the last and plane to conditions of the construction Authorization Required for Building Permit) The construction Authorization Required for Building Permit) The construction Authorization requirements of heles .1950, .1950, .1950, .1951, .1956, .1957, .1956, .1957, .1956, .1957, .1956, .1957, .1956, .1957, .1956, .1957, .1956, .1957, .1956, .1957, .1956, .1957, .1956, .1957, .1956, .1957, .1956, .1957, .1956, .1957, .1956, .1957, .1956, .1957, .1956, .1957, .1956, .1957, .1956, .1957, .1956, .1957	Proposed Wastewater System Type: 25% RADUC	620W				
Number of bedrooms: 4 Number of Occupants: 8 max Basement 145 100 Mayber 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 Authorized State Aged::::::::::::::::::::::::::::::::::::						
Pump Required: □Yes □ No □ Hay-be required based on final location and elevations of facilities Permit valid for: □ Five years Permit conditions: □ Authorized State Age(E): □ Description: □ Authorized State Age(E): □ Description: □ Date: 5 - 23 - 13 SEE ATTACHED SITE SKETCH The issuance of this promit by der/health Organizets the issuance of other parmit. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This is it is subject to compliance with the provisions of the Laws and Rules for Savage Treatment and Disposal and to conditions of this permit. The construction and installation requirements of Rules 1950, 1952, 1954, 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 layow. ISSUED TO: Sharteen A		ants: <u>8</u>	max			
Type of Water Supply: Community Public Well Distance from well fet Permit valid for: fit ve years Permit conditions:	Basement 🗆 Yes 🖾 No					
Permit conditions:						
The issuance of this permit by the Health Department in no way guarantees the issuance of other permits. The permit head not 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, .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: Sharen A MeereTT PROPERTY LOCATION: Sale 1550, ISSE, IDT #	/1 /1 /	🗆 Well Distan	ce from well	feet	Permit valid f	
is ubject 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 atached system layout. ISSUED TO: Sharton A Mean TT PROPERTY LOCATION: Srat 1550 iBetle1 Citronet Permits Facility Type: M2 New Expansion Facility Type: M2 No Basement Fixtures? Yes SubDivision Repair (Initial) Wastewater Flow: 480 GPD (see note below, if applicable []) 25% 726 DUCTON Scienter [Repair] (Initial) Wastewater Flow: 480 GPD Subplication Requirements/Conditions Number of trenches Z [Repair] [Repair] Feet on Center Solid Cover: gallons Exact length of each trench _150 feet Trench Spacing: 7 Feet on Center Solid Cover: gallons Frenches shall be installed on contour at a Solid Cover: <	Authorized State Agent: Jones & M	tohat a	Date:	5 - 23 -	13SE	E ATTACHED SITE SKETCH
(Required for Building Permit) The construction and installation requirements of Rules .1950, .1952, .1955, .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:	site is subject to revocation if the site plan, plat, or the intended use ch	anges. The Improvement	•	•	• • • •	5 1
SUBDIVISION	The construction and installation requirements of Rules .1950, .1952, .19 with the attached system layout.	(Reg	uired for Buildin	<u>g Permit)</u>	into this permit and shall be met.	Systems shall be installed in accordance
Basement? Yes Yes No Type of Wastewater System** 25% REDUCTION System (Initial) Wastewater Flow: 480 GPD (See note below, if applicable []) 25% Reductions (Repair) Installation Requirements/Conditions Number of trenches 7 Septic Tank Size 1200 gallons Exact length of each trench Pump Tank Size 1200 gallons Trenches shall be installed on contour at a Maximum Trench Depth of: 26>18 inches (Internet bottoms shall be level to +/-1/4" 36" above the trench bottom) 36" above the trench bottom) Pump Requirements: ft. TDH vs. GPM	ISSUED TO: Sharon A Men	εΠ			50 Betlel (
Basement? Yes Yes No Type of Wastewater System** 25% REDUCTION System (Initial) Wastewater Flow: 480 GPD (See note below, if applicable []) 25% Reductions (Repair) Installation Requirements/Conditions Number of trenches 7 Septic Tank Size 1200 gallons Exact length of each trench Pump Tank Size 1200 gallons Trenches shall be installed on contour at a Maximum Trench Depth of: 26>18 inches (Internet bottoms shall be level to +/-1/4" 36" above the trench bottom) 36" above the trench bottom) Pump Requirements: ft. TDH vs. GPM	Facility Type: MOD	New New	$\Box_{\mathcal{L}}$ Expansion	n 🗆 Repair		
Type of Wastewater System** 2.5% PEDU CITAD System (Initial) Wastewater Flow: 480 GPD (See note below, if applicable []) 25% PEDU CITAD System (Repair) Installation Requirements/Conditions Number of trenches 7 Septic Tank Size 1200 gallons Exact length of each trench 150 Pump Tank Size 1200 gallons Exact length of each trench 150 feet Trench Spacing: 7 Feet on Center Number of trenches shall be installed on contour at a Soil Cover: 6 inches Maximum Trench Depth of: 26->18 inches 36" above the trench bottom) In all directions) In all directions) 6PM Pump Requirements: ft. TDH vs. GPM 480		ures? 🗆 Yes				
(see note below, if applicable []) 25% [26] UCDON System	Type of Wastewater System** 25% REDU	UTZON SU	ston		(Initial) Wastewater	Flow: 480 GPD
Installation Requirements/Conditions Number of trenches Z	(See note below if applicable [])	/	<u> </u>		(*******)	
Installation Requirements/Conditions Number of trenches Z Septic Tank Size 1200 gallons Pump Tank Size gallons Trenches shall be installed on contour at a Maximum Trench Depth of: 150 feet Trench Spacing: 7 Feet on Center Soli Cover: 6 inches inches inches 6 inches Pump Requirements: ft. TDH vs. GPM GPM GPM 6 Aggregate Depth: 2 2	75% i26 Ju	cron Se.	cto-	(Renair)		
Septic Tank Size 1200 gallons Exact length of each trench feet Trench Spacing: Feet on Center Pump Tank Size gallons Trenches shall be installed on contour at a Soil Cover: (Maximum soil cover shall not exceed Maximum Trench Depth of: 26->18 inches (Trench bottoms shall be level to +/-1/4" 36" above the trench bottom) in all directions) inches Pump Requirements: ft. TDH vs GPM				(_	
Pump Tank Size gallons Trenches shall be installed on contour at a Maximum Trench Depth of: 26->18 inches (Maximum soil cover shall not exceed (Trench bottoms shall be level to +/-1/4" 36" above the trench bottom) Pump Requirements:ft. TDH vs GPM Soil Cover: Soil Cover: (Maximum soil cover shall not exceed 36" above the trench bottom) Pump Requirements:ft. TDH vs GPM				SO feet	Trench Spacing 9	Feet on Center
Maximum Trench Depth of: 26->18 inches (Maximum soil cover shall not exceed (Trench bottoms shall be level to +/-1/4" 36" above the trench bottom) in all directions) inches <u>6</u> Pump Requirements: ft. TDH vs. GPM Aggregate Depth: inches above pipe	· •	•			1 0 7	
(Trench bottoms shall be level to +/-1/4" 36" above the trench bottom) in all directions) Pump Requirements:ft. TDH vs GPM Aggregate Depth:2 inches above pipe	Tump Tank Size galons					·····
in all directions) Pump Requirements:ft. TDH vs GPM Aggregate Depth:2 inches above pipe					•	
Pump Requirements: ft. TDH vs. GPM Aggregate Depth: inches above pipe		`	Silali De level lu	• /-1/4	JU ADOVE LIE LIENC	n bottom)
Aggregate Depth:2 inches above pipe		,				La induction of
	rump kequirements:tt. IDH vs	_ 640			A	·
	Conditions:				Aggregate Deptn:	10

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: / 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 whe	en 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: James & Manhant a. cons Construction Authorization Expiration Date:	

HTE# <u>13</u>	5-5-31284	Permit # 27391
	Harnett County Dep	artment of Public Health
	Site	e Sketch

ISSUED TO:	Shanow	A M	PROPERTY LOCATON: <u>SALT</u>	550 Bethel	LOT # 1
Authorized State	Agent: Jan		S Monhant 281	#S Date:5	-23 - 13

