

HTE# 14-5-34160

Harnett County Department of Public Health

27900

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

ISSUED TO: LARRY K BAKER PROPERTY LOCATION: 581560 Festus RD
NEW REPAIR EXPANSION SUBDIVISION _____ LOT # _____
Site Improvements required prior to Construction Authorization Issuance: _____

Type of Structure: MODULAR

Proposed Wastewater System Type: Pump to ULTRA-SHADOW Conventional

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 100' feet

Permit conditions: _____ Permit valid for: Five years No expiration

Contractor to meet on site prior to install

Authorized State Agent: James E. Manhart Date: 7-24-14 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: LARRY K BAKER PROPERTY LOCATION: 581560 Festus RD
SUBDIVISION _____ LOT # _____

Facility Type: MODULAR New Expansion Repair

Basement? Yes No Basement Fixtures? Yes No

Type of Wastewater System** AT GRADE CONVENTIONAL Pump (Initial) Wastewater Flow: 360 GPD
(See note below, if applicable)

AT GRADE COP Pump (Repair)

Installation Requirements/Conditions Number of trenches 3

Septic Tank Size 1000 gallons Exact length of each trench 100 feet Trench Spacing: 9 Feet on Center

Pump Tank Size 1000 gallons Trenches shall be installed on contour at a Soil Cover: 6 inches

Maximum Trench Depth of: 12" 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: 2 inches above pipe

Conditions: Contractor to meet on site prior to install 12 inches total

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: _____ 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: James E. Manhart Date: 7-24-14
Construction Authorization Expiration Date: 7-24-19

HTE# 14-5-34160

Permit # 27900

Harnett County Department of Public Health Site Sketch

ISSUED TO: LARRY K BAKER

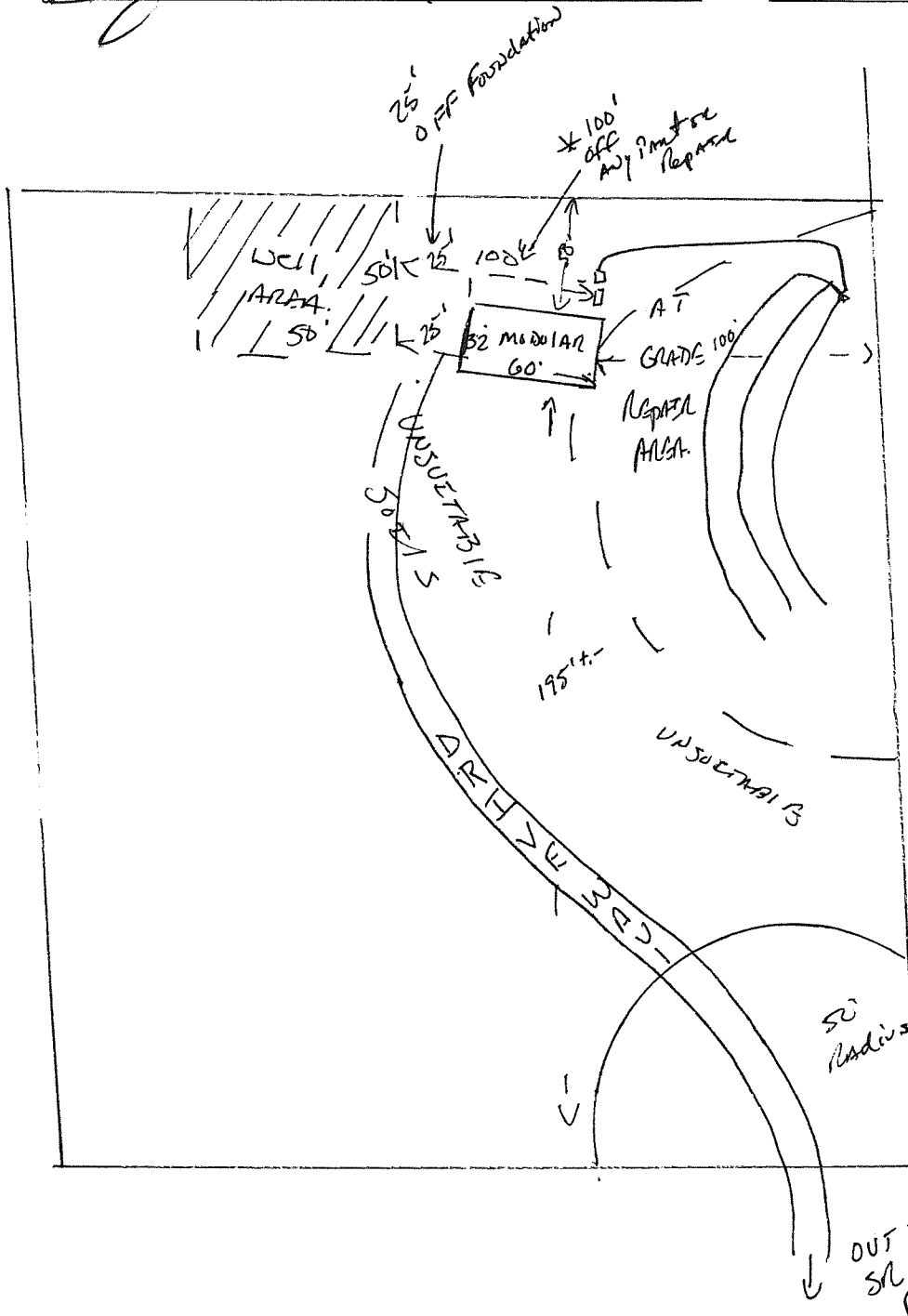
PROPERTY LOCATOR: 811560 Festus RD

SUBDIVISION _____

LOT # 2

Authorized State Agent: James E. Manhart III

Date: 7-24-14



* Contractor to MEET ON SITE Prior to install.

* DO NOT RUN WATER OR POWER IN SYSTEM OR Repair ABAS.