HTE# 15-5-36609 Harnett County Department of Public Health

28471

Improvement Permit

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: Hwy 42 ISSUED TO: JOHN + KARGA NEWHOUSE SUBDIVISION DUCKHORN FARMS NEW 🗗 EXPANSION Site Improvements required prior to Construction Authorization Issuance: MODULAN. Type of Structure: _ Proposed Wastewater System Type: 25% REDUCTUS Projected Daily Flow: 480 GPD Number of Occupants: 8 max Number of bedrooms: Basement TYes May be required based on final location and elevations of facilities Pump Required: □Yes □ No Type of Water Supply:

Community Public

Well Distance from well feet Five years Permit valid for: Permit conditions: ☐ No expiration 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, .1954, .1954, .1955, .1956, .1957, .1958, and .1959 are incorporated by references into this permit and shall be met. Systems shall be installed in accordance ISSUED TO: John + KARD NEWHOUSE PROPERTY LOCATION: Hwy 42
SUBDIVISION BUCKHOWN FARMS LOT # // SUBDIVISION But Initial Substantial Subdivision Subdin Maximum Trench Depth of: 29 inches (Trench bottoms shall be level to +/-1/4" 36" above the trench bottom) in all directions) Pump Requirements: _____ft. TDH vs. _____ Conditions: 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 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:

Construction Authorization Expiration Date:

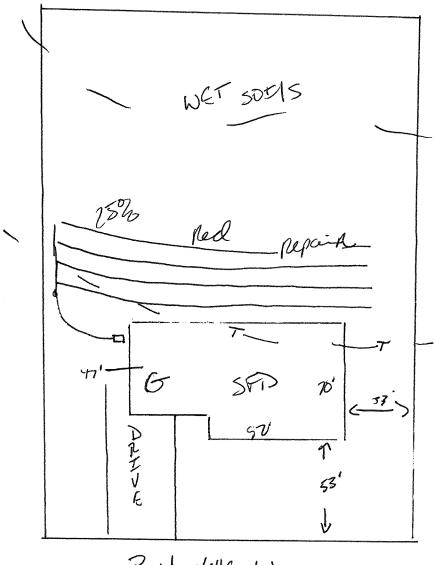
HTE# 15-5-36609

Permit # _____28471

Harnett County Department of Public Health Site Sketch

 .	PROPERTY LOCATON:	4-42		
ISSUED TO: JOHN + KIARRY NE	whous Esubdivision	BUCKHORN	FARMS	LOT #
Authorized State Agent:	,		7-27-12	

* STEPDONAIS WILL BE NEEDED.



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