HTE# 10-5-25-664 Harnett County Department of Public Health

Improvement Permit

2631n

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: Fasy Lane
SUBDIVISION Sorrell King PROPERTY LOCATION: Fasy Lane ISSUED TO: Scott Baker Site Improvements required prior to Construction Authorization Issuance: Type of Structure: Proposed Wastewater System Type: pomp to 25% Reduction
Projected Daily Flow: 240 GPD Number of Occupants: Number of bedrooms: Basement Yes No Pump Required: ☑Yes ☐ No ☐ May, be required based on final location and elevations of facilities Five years Permit valid for: Permit conditions: ☐ No expiration Authorized State Agent:: Date: 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: Scott Baker

PROPERTY LOCATION: Early Lane

SUBDIVISION Sorre // King LOT #

Facility Type: Moved House

New Expansion Repair

Basement? Yes No Basement Fixtures? Yes No

Type of Wastewater System**

Property Location: Early Lane

SUBDIVISION: Early Lane

SUBD (See note below, if applicable Number of trenches ______(Repair) **Installation Requirements/Conditions** Exact length of each trench 200 feet Trench Spacing: 9 Feet on Center Trenches shall be installed on contour at a Soil Cover: 6 inches Septic Tank Size ____/OO_O gallons Pump Tank Size /000 Maximum Trench Depth of: ______ inches (Maximum soil cover shall not exceed (Trench bottoms shall be level to +/-1/4" 36" above the trench bottom) in all directions) Pump Requirements: _____ft. TDH vs. ____ GPM Conditions: Contractor to meet on site for layout + final months above pipe inches above pipe 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: ___ 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: 12/6/2015

Harnett County Department of Public Health Site Sketch

	PROPERTY LOCATON: Fory Lane	
ISSUED TO: Scott Baker	SUBDIVISION Sorrell King	LOT #
Authorized State Agent: Legan Missin, Re	Date: 12	16/2010

