HTE# <u>13-5-32686</u> Harn	ett County Department of Public Health 27718
	Improvement Permit
А	building permit cannot be issued with only an Improvement Permit
- () ()	PROPERTY LOCATION: SCISOD TUDDET IZD
ISSUED TO: Richand E MU	
NEW 🗹 REPAIR 🗆 EXPANSIO	N 🗖 Site Improvements required prior to Construction Authorization Issuance:
Type of Structure:JFD	
Proposed Wastewater System Type: _25% ZGD	U LITUR_
Projected Daily Flow: <u>366</u> GPD	
Number of bedrooms: Number of Occup Basement 🗆 Yes 🖸 No	pants: max
	ired based on final location and elevations of facilities
Type of Water Supply: Community Public	
Permit conditions:	□ No expiration
	11 1 1 1 12 11
Authorized State Agent	Andre Date: 1-13-14 SEE ATTACHED SITE SKETCH
	ntees the issuance of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This 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 condition	
	Construction Authorization
	(Required for Building Permit)
The construction and installation requirements of Rules .1950, .1952, .1	954, .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: Richard & Moral	
50	
Facility Type:	New Expansion Repair
	tures? 🗆 Yes 🛛 Z No
Type of Wastewater System** _25% 7281	UCTUR (Initial) Wastewater Flow: 360 GPD
(See note below, if applicable \Box)	
2590 98	
Installation Requirements/Conditions	Number of trenches
Septic Tank Size <u>1000</u> gallons	Exact length of each trench 100 feet Trench Spacing: 7 Feet on Center
Pump Tank Size gallons	Trenches shall be installed on contour at a Soil Cover: inches
	Maximum Trench Depth of: 29 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 Co inches below pipe
	Aggregate Depth: inches above pipe
Conditions:	inches total
WATER LINES (INCLUDING IRRIGATION) MUST I	BE 10FT. FROM ANY PART OF SEPTIC SYSTEM OR REPAIR AREA.
NO UTILITIES ALLOWED IN INITIAL OR REPAIR D	DRAIN FIELD AREA.
** If applicable: I understand the system type specifies	t is different from the type specified on the application. I accept the specifications of this permit.
	i is universit from the type specified on the application. Taccept the specifications of this perint.
Owner/Legal Representative Signature	Data
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
	f the Laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit. SEE ATTACHED SITE SKETCH
Authorized State Agent:	Ma 1 - 13 - 14
nutionized state Agent	Construction Authorization Expiration Date:
	Construction Authorization Expiration Date:

HTE# 13-5-32606 Permit # 27718 Harnett County Department of Public Health Site Sketch ISSUED TO: Richard F Mundock SUBDIVISION _____ LOT # ____

