HTE# 15-5-36883 Harnett County Department of Public Health

28591

Improvement Permit

A building permit cannot be issued with only an Improvement Permit
S PROPERTY LOCATION: 31/7/2/tobson 20
ISSUED TO: Sugarture Home Buddens SUBDIVISION LOT # /
NEW 🗹 REPAIR 🗆 EXPANSION 🗆 Site Improvements required prior to Construction Authorization Issuance:
Type of Structure: 2 - D
Proposed Wastewater System Type: 25% FCBNU LFW7
Projected Daily Flow: 360 GPD
Number of bedrooms: Number of Occupants: 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 feet Permit valid for: 🖾 Five years
Permit conditions:
SM, A
Authorized State Agent: Date: 11-20-15 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, .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 Signature Home BIDAS PROPERTY LOCATION: Sec1712 Hobson RD LOT # /
ISSUED TO: Stephene Home 101023 PRUPERIT LUCATION: SUITLIFODSon 100
Facility Type:SFD 🗹 New 🗆 Expansion 🗆 Repair
Basement? 🗆 Yes 🖾 No 🛛 Basement Fixtures? 🗀 Yes 🖾 No
Type of Wastewater System** 25% REDUCTON System (Initial) Wastewater Flow: 360 GPD
(See note below, if applicable)
25% REDUCION Syster (Repair)
Installation Requirements/Conditions Number of trenches Z
Septic Tank Size 1000 gallons Exact length of each trench 150 feet Trench Spacing: 2 Feet on Center
Pump Tank Size gallons Trenches shall be installed as asstant at a feet of center
Pump Tank Size gallons Trenches shall be installed on contour at a Soil Cover: inches

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.

Conditions: _____

in all directions)

**If applicable: / understand the system type specified is different from the type specified on the application. I accept the specifications of this permit.

(Trench bottoms shall be level to +/-1/4"

Owner/Lo	egal	Representative	Signature
O WIICI/ L	L gai	nepresentative	Jignature

Pump Requirements: _____ft. TDH vs. _____ GPM

_____ Date: _____

36" above the trench bottom)

Aggregate Depth: Z inches above pipe

12 inches total

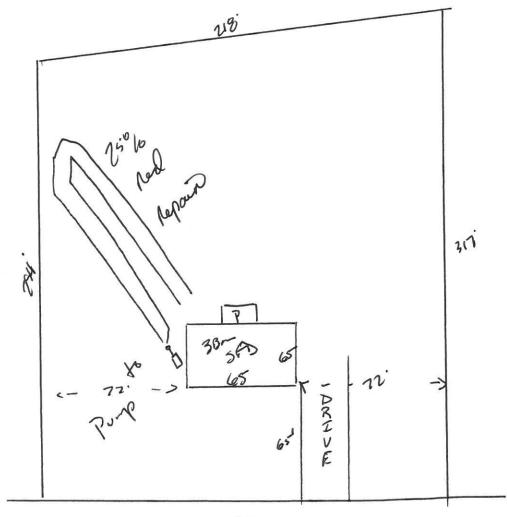
Maximum Trench Depth of: 24 inches (Maximum soil cover shall not exceed

This Construction Authorization is subject to revocation if the site plan, plat, or the intended use changes. The Construction Authoriza	ation shall not be transferred when there is a change in own	ership of the site. This
Construction Authorization is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and	d to the conditions of this permit. SEE A	TACHED SITE SKETCH

Authorized State Agent:	E Markon A	Date:	11-20-15	
	Construction Auth	orization Expiration Date:	11-20-18	

HTE# <u>15-5-36883</u> Permit # <u>28591</u> Harnett County Department of Public Health Site Sketch

PROPERTY LOCATON: BOLT 712 Hobson TUS		_
ISSUED TO: Signature Home Buddees SUBDIVISION_	LOT #	_
Authorized State Agent: Jones & Markunt Date: 11- 20-15-	-	



JR 1712 Hobson RD)