05-5-116192 HTE# 08-5-

Harnett County Department of Public Health

Repair

Improvement Permit

27556

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION DR1435 Trupp RD SUBDIVISION PV6 EXPANSION Site Improvements required prior to Construction Authorization Issuance: Type of Structure: Proposed Wastewater System Type: 25% REDUCTION Projected Daily Flow: 360 GPD Number of bedrooms: Number of Occupants: Basement Yes Pump Required: ☐Yes ☐ 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: ☐ No expiration Authorized State Agent::

Date: 7-26-13 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 PROPERTY LOCATION: \$1.1435 Tuipp no

SUBDIVISION PUG

Expansion Repair Basement? Yes No Type of Wastewater System** _____ (Initial) Wastewater Flow: 360 GPD (See note below, if applicable \square) 25% REDUCTION System (Repair) Installation Requirements/Conditions Septic Tank Size Exercises gallons Pump Tank Size gallons Maximum Trench Depth of: 24 mox 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. 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: Date: ____7 - 26-13 Construction Authorization Expiration Date: 7 - 18

HTE# 05-5-1161912

Permit # 27556

Harnett County Department of Public Health Site Sketch

| 1551150 TO 17 18 18 18 18 18 18 18 18 18 18 18 18 18 | PROPERTY LOCATON: 52 /435 Try SUBDIVISION PVG | OP RD |
|------------------------------------------------------|-----------------------------------------------|----------|
| ISSUED TO: Kussell Hughes | SUBDIVISION PVG | LOT # 40 |
| Authorized State Agent: 5 Marhon | Date: | 7-26-13 |

