25728

HTE#06-5-14287R

Harnett County Department of Public Health

Improvement Permit

	e issued with only an improvement re		
	PERTY LOCATION: SR 1435		107 # <10
ISSUED TO: Sugnature Home Burkleas SUE			
NEW ☑	Site Improvements requir	red prior to Construction Authoriza	ition Issuance:
Proposed Wastewater System Type: 25% REDUCTION System			
Projected Daily Flow: GPD			
Number of bedrooms: Number of Occupants: max			
Basement ☐Yes ☑ No			
Pump Required: ☐Yes ☐ No ☐ May be required based on final location	n and elevations of facilities		
Type of Water Supply: Community Public Well Distance fr Permit conditions:	om well feet	Permit valid for:	☐ Five years ☐ No expiration
M. I porto	5		
Authorized State Agent: Ashan	Date: 3-10-10	SEE ATTAC	CHED SITE SKETCH
The issuance of this permit by the Health Department in no way guarantees the issuance of other perm	its. The permit holder is responsible for checking	ing with appropriate governing bodies in m	eeting their requirements. This
site is subject to revocation if the site plan, plat, or the intended use changes. The Improvement Permi	t shall not be affected by a change in ownersh	nip of the site. This permit is subject to co	mpliance with the provisions of
the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.			
Construct	ion Authorization		
	d for Building Permit)		
The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .1957, .1958		to this nermit and shall be met Systems sh	nall he installed in accordance
with the attached system layout.	. and .1777 are incorporated by references inc	or this permit and shall be live. Systems as	an be instance in accordance
KSHED TO: 5' 10 know that builde	PROPERTY LOCATION: 5/ //	35 Tain RA	
ISSUED TO: Signature Home builder	CURRINGIAN PI	t variable	10T #
		AT VENEYMEN CONO	ea LOI # 57
, ,,	Expansion 🗆 Repair	,	
Basement? ☐ Yes ☑ No Basement Fixtures? ☐ Yes ☑	No		
Type of Wastewater System** 25% REDUCTED System		(Initial) Wastewater Flow:	360 GPD
(See note below, if applicable □)		(/	
25% REDUCTION Systa	(Papair)		
- /-	(Repair)		
Installation Requirements/Conditions Number of trenches	4	- · · · · · · · · · · · · · · · · · · ·	
Septic Tank Size 1000 gallons Exact length of each	trench 80 feet	Trench Spacing:	Feet on Center
		Soil Cover: in	ches
Maximum Trench Der	oth of: 30-)18 137, 200 inches	(Maximum soil cover shall no	ot exceed
97 O 10 10 10 10 10 10 10 10 10 10 10 10 10	l be level to +/-1/4"	36" above the trench botto	
in all discosions)	24. SIQ-38d, 4th	30 above the trench botto	m)
in all directions)	24-318-3Rd, 4th		
Pump Requirements:ft. TDH vs GPM			inches below pipe
		Aggregate Depth: Z,	inches above pipe
Conditions:		1	Z inches total
**If applicable: I understand the system type specified is different from the	type specified on the application	I accent the specifications of th	nis nermit
11 applicable. I understand the system type specified is unterent from the	The specified on the application.	r accept the specimeations of th	is perime.
Owner/Legal Representative Signature:		Date:	
This Construction Authorization is subject to revocation if the site plan, plat, or the intended use change	as The Construction Authorization shall not be	transferred when there is a change in own	nership of the site This
Construction Authorization is subject to compliance with the provisions of the Laws and Rules for Sewag			TTACHED SITE SKETCH
construction Authorization is subject to compnaince with the provisions of the caws and killes for sewag	e treatment and Disposal and to the condition	is or ans permit. SEE A	TIACILE SILE SKLICH
and the	2685	2	
Authorized State Agent: James & Manhon &	Date:	5-10-10	
Construct	Date:	te:3 -10 -15	_

Harnett County Department of Public Health Site Sketch

PROPERTY LOCATON: 5/4	435 TRIPP RD
ISSUED TO: Signature Home Builders SUBDIVISION Plantat	him at brieg mal LOT # 54
Authorized State Agent: James & Manhant a Nons	

RUN WATER AND POWER LINES DOWN property LINE then 90° INTO Home S Front HAIF



