HTE# 06-500 | 5827 Harnest County Department of Public mealth 23242

Improvement Permit

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: 108 Regency Homes: SUBDIVISION TORKShine Plantation

Site Improvements required prior to Construction Authorization Is Site Improvements required prior to Construction Authorization Issuance: Type of Structure: SFO (56×39) 3BR Proposed Wastewater System Type: 25% Reduction System Projected Daily Flow: 360 Number of bedrooms: Number of Occupants: Basement Yes 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 50 feet Permit valid for:

Permit conditions: Mect 20 site for Final Layort Maintain all Set Backs Five years ☐ No expiration 5748 Oct Plumbing Shallow Authorized State Agent:: 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: Regency Homes

PROPERTY LOCATION: 108

SUBDIVISION Yorkshine Plantation LOT # 120 Facility Type: SFO (F6×34) 3BR New Expansion Repair Basement Fixtures?

Yes Type of Wastewater System** 25% Reduction System(Initial) Wastewater Flow: 363 GPD (See note below, if applicable

) Installation Requirements/Conditions Exact length of each trench × 180 feet Trench Spacing: 9 Feet on Center Septic Tank Size _____ gallons Pump Tank Size Trenches shall be installed on contour at a Maximum Trench Depth of: 18 24 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. ____ inches below pipe Aggregate Depth: inches above pipe inches total Conditions: 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 Date: 10.16.06 Authorized State Agent: ____ & Construction Authorization Expiration Date: 10-16-2011

Harnett County Department of Public Health Site Sketch

