HTE# 06.500 15934 Harmet County Department of Public mealth 23396

Improvement Permit

	building permit cannot be issued with only an Impr	rovement Permit		
ISSUED TO: AOK Partners	PROPERTY LOCATION: \\ SUBDIVISION \CO/>	16 0 H.115 LOT # 21		
NEW REPAIR □ EXPANSI		ments required prior to Construction Authorization Issuance:		
Type of Structure: (FD - 40 V GT	3BR			
Proposed Wastewater System Type: Pumpts	Sometional			
Projected Daily Flow: 360 GPD				
Number of bedrooms: Number of Occu	pants:max			
Basement 🗆 Yes 📈 No				
	uired based on final location and elevations of faciliti			
		feet Permit valid for: > Five years		
Permit conditions: Meet on, to	MAINTAIN GIT JET SHEK	C∫ No expiration		
Authorized State Agent: Date:				
	Construction Authorizati	<u>011</u>		
and the second second	(Required for Building Permit)			
	.1952, .1954, .1955, .1956, .1957, .1958. and .1959 are	incorporated by references into this permit and shall be met. Systems shall I		
installed in accordance with the attached system layout. ISSUED TO:	PROPERTY LOCATION:	1///		
1330ED 10. 401 114 14 (CC)	SUBDIVISION CO	1112		
Facility Type: SFO - 40x65 3B1	New Expansion	Repair LOI # 20		
		Repair		
	xtures? Yes Ao.	Flow: 363 GPD		
Type of Wastewater System**		riow: GFD		
(See note below, if applicable \square)	260 (F (Bassia)			
	d 90 C/ (Repair)			
Installation Requirements/Conditions				
Septic Tank Size / OOO gallons	Exact length of each trench 1x243	feet Trench Spacing: 7 Feet on Center		
Pump Tank Size 1000 gallons	Trenches shall be installed on contour at a	Soil Cover: inches		
Tump rams size salions	Maximum Trench Depth of: 18 24	inches (Maximum soil cover shall not exceed		
9 To Be determined at	(Trench bottoms shall be level to +/-1/4"	36" above the trench bottom)		
Later Opte	in all directions)	30 above the trench bottomy		
Pump Requirements:ft. TDH vs	GPM	6 inches balow at		
a unip nequirementsit. 1DR 45	(1)	Aggregate Depth: inches below pi		
Conditions:		Aggregate Depth inches to		
**If applicable: I understand the system	type specified is different from the type specified	d on the application. I accept the specifications of this permit.		
Owner/Legal Representative Signature:		Date:		
		ion Authorization shall not be transferred when there is a change in ownersh		
of the site. This construction Authorization is subject to compl	ance with the provisions of the taws and knies for sewage	e Treatment and Disposal and to the conditions of this permit. SEE ATTACHED SITE SKETCH		
Authorized State Agent:	11/12	Date: 11-13-04		
Authorized State Agent.	Construction Authorization Fund	1.1 5		
	Construction Authorization Expi	nation vate. The state of the s		

Permit # 23396

Harnett County Department of Public Health Site Sketch

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Must ansite Maintain All set Jahle
Enstall 1x240 Pry to Conventional at 1860 28" Days.