HTE# 06.500 15962 Har t County Department of Public ... alth 23388

Improvement Permit

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: /// SUBDIVISION COLONIAL HILLS EXPANSION Site Improvements required prior to Construction Authorization Issuance: 40X65 Type of Structure: SFD Proposed Wastewater System Type: Projected Daily Flow: Number of bedrooms: Number of Occupants: Basement Yes No Pump Required: □Yes ☑ No May be required based on final location and elevations of facilities Public Well Distance from well 50 feet Five years Type of Water Supply:

Community Permit valid for: Maintain Allet Pach Permit conditions: Mcc+ ☐ No expiration SEE ATTACHED SITE SKETCH 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. PROPERTY LOCATION: 1/16
SUBDIVISION Colonial H.115 Yox65 301 ✓ New □ Expansion □ Repair Basement Fixtures?

Yes No Basement? Yes No Wastewater Flow: 763 GPD Kun to Conventiona (Initial) Type of Wastewater System** (See note below, if applicable) Installation Requirements/Conditions Exact length of each trench $\frac{1}{2}$ 80 feet Trench Spacing: ______ Feet on Center Septic Tank Size _____ gallons Pump Tank Size 100 gallons Trenches shall be installed on contour at a Maximum Trench Depth of: ___/ & ____ inches To De determined at Later (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 inches above pipe Conditions: inches total ** 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: Construction Authorization Expiration Date: 11-9-201

Harnett County Department of Public Health Site Sketch

ISSUED TO: _	AOK	Partner	-	PROPERTY LOCATO		H.113	LOT #	44
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