HTE# 06-5-16085

Harnest County Department of Public nealth 23344

Improvement Permit

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: SR 1403 HAIZNCTT Central SUBDIVISION PEAR MENDOS EXPANSION Site Improvements required prior to Construction Authorization Issuance: STUB PIUmbers out Above Firegl Type of Structure: 3FP Proposed Wastewater System Type: 25% REDuction 345ter Projected Daily Flow: 360 GPD Number of Occupants: 6 max Number of bedrooms: Basement | Yes | No | 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 _______ feet | Permit valid for: | Five years Type of Water Supply:

Community Public Well Distance from well feet Permit valid for: Five years

Permit conditions:

STUD Plumbing Out Above Finish Grade on Homes Pager Refer.

No expiration Pump may st reguerts. 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: IHN Properties PROPERTY LOCATION: SRIYO3 HARNETT Central SUBDIVISION PEAN MEADON LOT # 17 New Expansion Repair Facility Type: SFD Basement? Yes Basement Fixtures? Yes No Wastewater Flow: 360 GPD 25% RANGETION Sys 7-(Initial) Type of Wastewater System** (See note below, if applicable

) Installation Requirements/Conditions Exact length of each trench 120 feet Septic Tank Size 1000 gallons Pump Tank Size gallons Trenches shall be installed on contour at a Maximum Trench Depth of: _______ 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: Z inches above pipe I understand the system type specified is different from the type specified on the application. I accept the specifications of this permit. **If applicable: 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

Harnett County Department of Public Health Site Sketch

	PROPERTY LOCATON: 3/1403 HARNETT Central	P
ISSUED TO: IHN Properties	SUBDIVISION PEARMEADON	_ LOT # _ / 7
Authorized State Agent: CMahon	Date: 11-20-06	

