HTE# 06-5-16153

Harnett County Department of Public Health

25041

Improvement Permit

| | PROPERTY LOCATION: E- | |
|---|--|---|
| ISSUED TO: QUEST DEVELOPMENT (| Co. Inc SUBDIVISION GATENESS | LOT # 7 |
| NEW ₩ REPAIR □ _ EXPANS | | quired prior to Construction Authorization Issuance: |
| Type of Structure: SFO (63×60) | | 1 - Francisco de la constante |
| Proposed Wastewater System Type: 25% Room | XON SYSTEM | |
| Projected Daily Flow: 360 GPD | | |
| Number of bedrooms: 3 Number of Occ | upants:max | |
| Basement □Yes ⋈ No | *************************************** | |
| Pump Required: ☐Yes ☐ No May be req | uired based on final location and elevations of facilities | |
| Type of Water Supply: Community Public Permit conditions: | ☐ Well Distance from well 100 feet | Permit valid for: Five years D No expiration |
| Mari - | | • |
| | | |
| Authorized State Agent: | PS Date: 10 9 08 | SEE ATTACHED SITE SKETCH |
| the Issuance of this permit by the Health Department in no way guar site is subject to revocation if the site plan, plat, or the intended use the Laws and Rules for Sewage Treatment and Disposal and to condition | antees the issuance of other permits. The permit holder is responsible for ch changes. The Improvement Permit shall not be affected by a change in own ons of this permit. | ecking with appropriate governing bodies in meeting their requirements. This ership of the site. This permit is subject to compliance with the provisions of |
| | Construction Authorization | |
| | (Required for Building Permit) | |
| The construction and installation requirements of Rules .1950, .1952, with the attached system layout. | 1954, 1955, 1956, 1957, 1958, and 1959 are incorporated by references | into this permit and shall be met. Systems shall be installed in accordance |
| ISSUED TO: QUEST DEVELOPMENT. | CO. N.C. PROPERTY LOCATION: LEM SUBDIVISION GARGNESS | WEL BLACK RD |
| Facility Type: SFD (3×60) | SUBDIVISION GARGNEST | LOT # |
| Facility Type: BRD CES ACOD | New Expansion Repair | |
| | xtures? 🗆 Yes 🔀 No | |
| , | EDUCTION SYSTEM | (Initial) Wastewater Flow: 340 GPD |
| (See note below, if applicable □) File | (Repair) | |
| Installation Requirements/Conditions | Number of trenches 1 | |
| Septic Tank Size 1000 gallons | Exact length of each trench 340 feet | Trench Spacing: Feet on Center |
| Pump Tank Size gallons | Trenches shall be installed on contour at a | Soil Cover: 6 inches minimum |
| · | Maximum Trench Depth of: inches | (Maximum soil cover shall not exceed |
| | | 36" above the trench bottom) |
| | in all directions) | 30 above the trench bottom, |
| Pump Requirements:ft. TDH vs | | inska kalam sina |
| | 0111 | inches below pipe |
| Conditions: | | Aggregate Depth: inches above pipe inches total |
| | | |
| **If applicable: / understand the system type specifie | d is different from the type specified on the application. | I accept the specifications of this permit. |
| Owner/Legal Representative Signature: | | Date: |
| This Construction Authorization is subject to revocation if the site plan, | plat, or the intended use changes. The Construction Authorization shall not b | e transferred when there is a change in ownership of the site. This |
| Construction Authorization is subject to compliance with the provisions | the Laws and Rules for Sewage Treatment and Disposal and to the condition | ons of this permit. SEE ATTACHED SITE SKETCH |
| | | |
| Authorized State Agent: | Construction Authorization Expiration D | 10 9 08 |
| | Construction Authorization Evaluation D | 10: 10:19/3 |

Harnett County Department of Public Health Site Sketch

116'

PROPERTY LOCATON: LEMUEL BLACK QO

ISSUED TO: Quest Development Co. Loc SUBDIVISION GATEMENT LOT # 7

Authorized State Agent: Date: 10/9/08

- · FOUNDATION POURS ATTIME OF PROPOSAL ENALVATION
- · REPAIR PUMP TO FILL OFFSITE EASEMENT ON LOT 4

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