HTE# 06-500 16421 06-500 16428

Harnett County Department of Public Health 23604 Improvement Permit

	Ā	building permit cann	not be issued wit	th only an Improver	nent Permit	1/1//
ISSUED TO: /imothy	Holden		PROPERTY LOCA _ SUBDIVISION _	1110N: / & 3	4 CRGITAI	11=1der Love)
NEW A REPAIR	EXPANSION		_ 300011131011 _	Site Improvement	s required prior to Construction	n Authorization Issuance: 61.0°
Type of Structure: SFO -		JDA	_			
Proposed Wastewater System Type:	Conventions	. (-			
Projected Daily Flow: 362	S GPD	1				,
Number of bedrooms: 3	Number of Occupa	ınts: 🔑	max			
Basement Yes No	[77] Mari ka manda			.c		
Pump Required: ☐Yes	itv	ed based on final lo	ca from well	ations of facilities	Permit valid	for: Five years
Permit conditions: Mcet	Dante Br	Final	L-A-3-4		remin valid	No expiration
Shallow (At	or near G	enond leve	17		<u> </u>	
	C					
Authorized State Agent:	LA		Date:	01-12-5	٦	SEE ATTACHED SITE SKETCH
The issuance of this permit by the Healt	th Department in no way	guarantees the issuan	ce of other permit	ts. The permit holder	is responsible for checking with a	ppropriate governing bodies in meeting
their requirements. This site is subject to permit is subject to compliance with the	o revocation if the site p	lan, plat, or the inten	ded use changes. I	The Improvement Perr	nit shall not be affected by a cha	nge in ownership of the site. This
		Constr	uction Au	thorization		
			uired for Build			
The construction and installation requires	ments of Rules .1950, .19	952, .1954, .1955, .1 <mark>9</mark>	56, .1957, .1958.	and .1959 are incorp	orated by references into this per	mit and shall be met. Systems shall be
installed in accordance with the attached	1 system layout.		DOODERTY	LOCATION: _/	74	
ISSUED TO: Timothy	11214616				<u>د د د د د د د د د د د د د د د د د د د </u>	INT #
Facility Type: SFD - 70	10 - CCK	3 P- 1 Now	SUBULTISIC Expans	ON Rep		LOT #
Basement? Yes No			No Expans	мон 🗀 кер	all	
Type of Wastewater System**	Convention	iles: Lites	(Initial)	Wastewater Flow	r. 365 GPD	
(See note below, if applicable 🔀	ń		(milial)	Wastewater Flow	. <u>505</u> GFD	
(over more determ), in appricable 🗩	1480 LF	1 LPP		_(Repair)		
Installation Requirements/Conditio				('''')		
Septic Tank Size <u>1005</u>	gallons	Exact length of e	ach trench 5	xlas fee	t Trench Spacing: $\frac{9}{2}$	Feet on Center
Pump Tank Size	gallons	Trenches shall be			Soil Cover: 6	inches
		Maximum Trench	Depth of:	<u>8</u> inch	es (Maximum soil cover	r shall not exceed
		(Trench bottoms			36" above the tren	
		in all directions)				
Pump Requirements:	_ft. TDH vs	GPM				inches below pipe inches above pipe
					Aggregate Depth:	inches above pipe
Conditions:		***************************************				12 inches total
**If applicable: / unders	stand the system typ	e specified is diffe	rent from the i	type specified on	the application. I accept the	e specifications of this permit.
Owner/Legal Representative Signat This Construction Authorization is subject	ure:				Date:	
his Construction Authorization is subject	to revocation if the site	plan, plat, or the inte	nded use changes.	The Construction Aut	horization shall not be transferred	when there is a change in ownership
of the site. This Construction Authorization	n is subject to complianc	e with the provisions -	of the Laws and R	ules for Sewage Treat	ment and Disposal and to the cor	nditions of this permit.
Authorized Ctota Azzati	ماماس	A-R1		Α.		SEE ATTACHED SITE SKETCH
Authorized State Agent:	0 (00)	71,5			re: 01-12-07	
1		Constr	uction Authori	zation Expiration	n Date: <u>ひト 12-2</u> 5	<u> </u>

Permit # __ 2763 \(\) HTE# 06500 /643/ 26-500/6428 Harnett County Department of Public Health Site Sketch PROPERTY LOCATON: 1224 (Crytal Holder Lone)

SUBDIVISION _______ LOT # _____ 6109 AC ISSUED TO: Timothy Holder Authorized State Agent: Date: <u>(0//2-07</u> Meet on site for Fivel LAyord To SR 1234 STUB OF Plumbing shallow Where shown OXUTIVE Maintain All MORNE set DAIKI 45 Intall 4x100 06-500 1424 STORAL A+ 18" 0-1dm 66-50016471 150. 70×70 JBASFA

Path