## HTE# 0650016 460RHarnett County Department of Public Health 23815

**Improvement Permit** 

_	building permit cannot be issued with only an Impro		
ISSUED TO: Custom Contraction	PROPERTY LOCATION: 120		
NEW REPAIR FYPANCIE	N Cita Improveme		V-/
Type of Structure: SED - 52 x 4 2	3BC	ents required prior to Construction Authorization Issuance:	
Type of Structure: SFO-52x42 Proposed Wastewater System Type: 257	Reduction syl		
Projected Daily Flow: GPD			
Number of bedrooms: Number of Occu	pants: max	,	
Basement Ves No			
Pump Required: Yes No May be requ	ired based on final location and elevations of facilities		
Type of Water Supply: Community Public Permit conditions: Supply: Community Public	Pin Shall har at Georal La	et Permit valid for: Five years	
Mintain All Set Backs	17 7 8 2000 TEVE	lochighe   No expiration	N
Authorized State Agent:	Date: 3.27-0	SEE ATTACHED SITE SKETCH	
The issuance of this permit by the Health Department in no wa	y guarantees the issuance of other permits. The permit hold	er is responsible for checking with appropriate governing hodies in n	meeting
their requirements. This site is subject to revocation if the site permit is subject to compliance with the provisions of the Laws	pian, piat, or the intended use changes. The Improvement Pi	ermit shall not be affected by a change in ownership of the site. This	is
permit is subject to compliance with the provisions of the Laws	and rules for sewage freatment and Disposal and to condit	ions of this permit.	
	Construction Authorization	1	
	(Required for Building Permit)	•	
The construction and installation requirements of Rules .1950, .	952, .1954, .1955, .1956, .1957, .1958, and .1959 are inco	prporated by references into this permit and shall be met. Systems sl	hall be
ISSUED TO: Confrar	PROPERTY LOCATION:	(20)	
Facility Type: SFD - 52x 42 - 31	SUBDIVISION CANOL		-/ (
Recomment? Ver SY No. Possess Fin	New 🗆 Expansion 🗆 R	pair ·	
Basement? ロ Yes タ No Basement Fix Type of Wastewater System** ユブルルム	ures: Lifes No	7)	
(See note below, if applicable 🖽	-ction Syc. (Initial) Wastewater Flo	ow: <u>J(v)</u> GPD	
245 LE	1 LC (Renair)		
Installation Requirements/Conditions	(Repair)		
moderated in regular circular conditions			
Septic Tank Size 1000 gallons	Exact length of each trench $3 \times 5$ for	pat Transh Spacing: 9 Fact on Consum	
Pump Tank Size gallons	Trenches shall be installed on contour, at a	Soil Cover: Feet on Center inches	
8=	Maximum Trench Depth of: 18 24 inc	chas (Maximum sail saver shall not succeed	
	(Trench bottoms shall be level to +/-1/4"	ches (Maximum soil cover shall not exceed 36" above the trench bottom)	
	in all directions)	30 above the french bottom)	
rump Requirements:ft. TDH vs		inches heleur	, nina
		Aggregate Depth: inches below	pipe
onditions:		inches	e pipe
		inches	wai
*If applicable: I understand the system typ	ne specified is different from the type specified on	the application. I accept the specifications of this perm	
wner/Legal Representative Signature:		Date:	
his Construction Authorization is subject to revocation if the site I the site. This Construction Authorization is subject to complian	plan, plat, or the intended use changes. The Construction A	uthorization shall not be transferred when there is a change in owner	ership
subject to compilar	The the provisions of the Laws and Rules for Sewage free	SEE ATTACHED SITE SKETCH	
uthorized State Agent:	~ thi	ite: 3.37.37	
,	Construction Authorization Expiration	on Date: <u>327-2012</u>	
	The state of the s	July 401-	

HTE# 06.500/6460 R

Permit # <u>23815</u>

## Harnett County Department of Public Health Site Sketch

