HTE#<u>07-5-16511</u> 07-5-14512

Harnett County Department of Public Health 24036

Improvement Permit

	PROPERTY LOCAT	10N:5R/407 W	ADE STEPHENSON	N RD
ISSUED TO: SERGIO VANINA	_ SUBDIVISION _	FERSTONE		LOT # 9
NEW ☑ ′ REPAIR □ EXPANSION □			quired prior to Construction	
Type of Structure:				
Proposed Wastewater System Type: 25% REDUCTION Soften	new .			
Projected Daily Flow: 30 GPD		****		
Number of bedrooms: 3 Number of Occupants: 6 Basement 1 Yes 1 No	_max			
Basement □Yes ☑ No Pump Required: □Yes □ No ☑ May be required based on final le		· / / / / / /		
Type of Water Supply: Community Public Well Distan	ocation and elevat	ons of facilities	Permit valid	for: Five years
Permit conditions:	ice irolli well	leet	rermit valid	•
				No expiration
Authorized State Agents James & Markanta as	Data	1-29-07	,	CIT ATTACHED CHE CHEYCH
Authorized State Agents one C Markon To Research The issuance of this permit by the Health Department in no way guarantees the issuance of this permit by the Health Department in no way guarantees the issuance of this permit by the Health Department in no way guarantees the issuance of this permit by the Health Department in no way guarantees the issuance of this permit by the Health Department in no way guarantees the issuance of this permit by the Health Department in no way guarantees the issuance of this permit by the Health Department in no way guarantees the issuance of this permit by the Health Department in no way guarantees the issuance of this permit by the Health Department in no way guarantees the issuance of this permit by the Health Department in no way guarantees the issuance of this permit by the Health Department in no way guarantees the issuance of the instance of	vate: nce of other permits	The nermit holder is re	schancible for checking with an	SEE ATTACHED SITE SKETCH
their requirements. This site is subject to revocation if the site plan, plat, or the inten	ded use changes. Th	. The permit holder is re he Improvement Permit si	sponsible for checking with ap hall not be affected by a chan	opropriate governing bodies in meeting
permit is subject to compliance with the provisions of the Laws and Rules for Sewage	Treatment and Dispo	osal and to conditions of	this permit.	ige in ownership of the site. This
Constr	uction Aut	horization		
	uired for Buildin			
The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .19	56, .1957, .1958. a	nd .1959 are incorporate	ed by references into this perm	mit and shall be met. Systems shall be
installed in accordance with the attached system layout.				
ISSUED TO: <u>Sengto Vantuca</u>	PROPERTY	LOCATION: SP2140	07 WADE STEPI	14621502)
, , , , , , , , , , , , , , , , , , ,	SUBDIVISIO	N FIELD Ston	•	LOT # <u> </u>
Facility Type: SFD New	☐ Expansion	on 🗌 Repair		.,
Basement? Yes No Basement Fixtures? Yes	☑ No			
	(Initial)	Wastewater Flow:	<u>360</u> GPD	
(See note below, if applicable \square)				
BP Repair		(Repair)		
Installation Requirements/Conditions				
	4 X	_		.
		80 feet	Trench Spacing: 9	Feet on Center
Pump Tank Size gallons Trenches shall be	installed on con	itour at a	Soil Cover:	inches
Maximum Trench	Depth of:	inches	(Maximum soil cover	shall not exceed
(Trench bottoms :	shall be level to	+/-1/4"	36" above the trend	ch bottom)
in all directions)				,
Pump Requirements:ft. TDH vs GPM				6 inches below pine
			Aggregate Depth:	inches below pipe inches above pipe
Conditions:				inches total
				menes total
**If applicable: I understand the system type specified is differ	rent from the ty	pe specified on the .	application. I accept the	specifications of this permit.
Owner/Legal Representative Signature				
Owner/Legal Representative Signature:			Date:	
This Construction Authorization is subject to revocation if the site plan, plat, or the inter of the site. This Construction Authorization is subject to compliance with the provisions o	nued use changes. ! of the laws and Dul	ne Construction Authoriza	and Disposal and to the	when there is a change in ownership
A	Laws allu NUI	es tot semage treatment	and הוא הצימליות הווה CLC	MUDIS OF THIS PERMIT.
Authorized State Agent: Janes Manhanten	×	Date:	1.16-X7	EE ATTACHED SITE SKETCH
The same of the sa	uction Authoria	Date:	1-2-1-01	

HTE#	07-5-	16511
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Permit # <u>24036</u>

Harnett County Department of Public Health Site Sketch

•/	PROPERTY LOCATON: SN 1407 WADE STEP	
ISSUED TO: <u>Jensio Vaninca</u>	SUBDIVISION <u>FEELDS FOUR</u>	LOT # <u>9</u>
Authorized State Agent EManhan	Jons Date: 1-29	-07
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* WOODED	33_/	
* Contractor to MEET ON SITE Prior to INSTALL.	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
MERT ON SLIE	41, 68	
Prior to INStall.	5/	
	78'	
X= 11/100045	SFD sight	
	78'	
CICAMEN FOR DUALNETE &. 3PA	RAPIL	
Dragnfield.	/ 54/	
131		
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