HTE# 07-500/6519

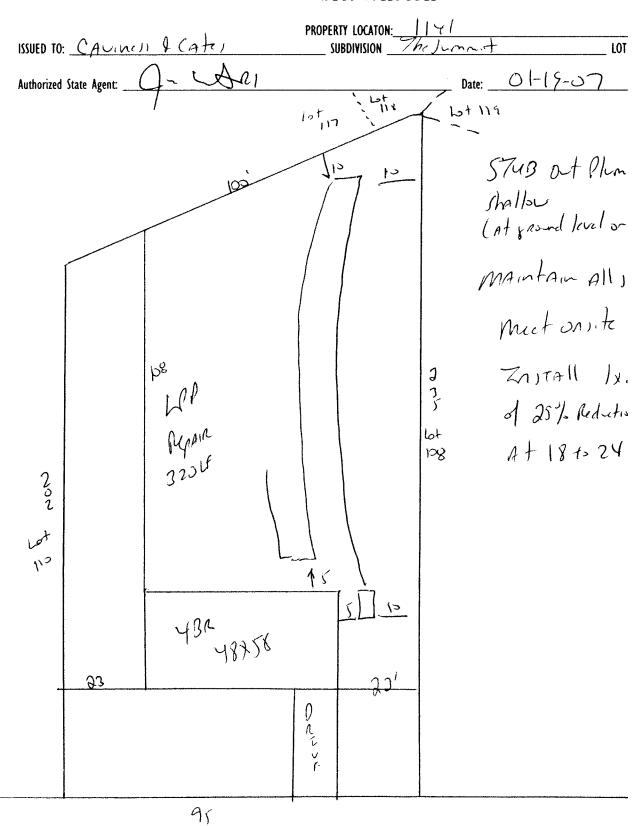
Harnett County Department of Public Health 2360

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

ISSUED TO: CAUNIS O CAtes	PROPERTY LOCATION: 1741 SUBDIVISION TO Summer
NEW REPAIR C EXPANSION C	Site Improvements required prior to Construction Authorization
Type of Structure: SFD - 48 x 58 +BR	
Proposed Wastewater System Type: 25% Reduction System	
Projected Daily Flow: 435 GPD	
Number of bedrooms: 4 Number of Occupants: 8	_max
Basement □Yes 😾 No	
Pump Required: □Yes May be required based on final l	
Type of Water Supply: Community Public Well Distar Permit conditions: 5748 Ot Ohmbon, Shallow	nce from well 50 feet Permit valid for: > (At vasuad ITVC achiahur)
Permit conditions: JMD 09 (Mmbing Shallow	(At yound Irvel or higher)
Maintain All set Backs	
nt 1	011(07
Authorized State Agent:	Date: 01-15-57 SEE ATTACHED
	nce of other permits. The permit holder is responsible for checking with appropriate governeded use changes. The Improvement Permit shall not be affected by a change in ownershi
permit is subject to compliance with the provisions of the Laws and Rules for Sewage	
Constr	ruction Authorization
(Re	guired for Building Permit)
· ·	956, .1957, .1958. and .1959 are incorporated by references into this permit and shall be
installed in accordance with the attached system layout.	1157 1
ISSUED TO: <u>Caurull</u> & Cate)	PROPERTY LOCATION: // Y /
110	subdivision The Jummit
Facility Type: SFD-48X58 43R X New	Expansion Repair
Basement? Yes No Basement Fixtures? Yes	1 (D)
Type of Wastewater System** 25% Reduction System	_(Initial) Wastewater Flow:GPD
(See note below, if applicable 325 LF 1 LPP	
	(Repair)
Installation Requirements/Conditions	
l o	9
	each trench 1×210 feet Trench Spacing: Feet
,	e installed on contour at a Soil Cover: inches
	n Depth of: 18-2 inches (Maximum soil cover shall not ex
(Trench bottoms	shall be level to +/-1/4" 36" above the trench bottom)
in all directions)	
Pump Requirements:ft. TDH vs GPM	MANAGEMENT AND
	Aggregate Depth:
Conditions:	
*If applicable: Lunderstand the system type specified is diff.	erent from the type specified on the application. I accept the specification
- Shoetstand the System type specimes is ann	sent from the type specified on the appreciation, i accept the specification
Owner/Legal Representative Signature:	Date: tended use changes. The Construction Authorization shall not be transferred when there is
nis construction Authorization is subject to revocation if the site plan, plat, or the ini If the site. This Construction Authorization is subject to compliance with the provisions	tended use changes. The Construction Authorization shall not be transferred when there is of the Laws and Rules for Sewage Treatment and Disposal and to the conditions of this
	CEE ATTACHEL
Authorized State Agent:	Truction Authorization Expiration Date: 01-19-2012
Const	ruction Authorization Expiration Date: $01-19-2012$

Harnett County Department of Public Health Site Sketch



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