HTE#07-500165201 Harnett County Department of Public Health 2365

Improvement Permit

A	ouilding permit cannot be issued with	
ISSUED TO: CAVINE 1) Ocates	PROPERTY LOCATION	
	SUBDIVISION/	
NEW REPAIR EXPANSION	a V Da	Site Improvements required prior to Construction Authorization
Type of Structure: SFO 52 x 5 C	8 4 DR	
Proposed Wastewater System Type: 25% (led-c	tion sut	
Projected Daily Flow: 435 GPD		
Number of bedrooms: Number of Occupa	nts: 8 max	
Basement Yes Mo		
	ed based on final location and elevation	
Type of Water Supply: Community Public	☐ Well Distance from well	feet Permit valid for:
STUB Plumbing at sha	Final Way	
314B Flumbing at Stra	1100, AT & Roud Icve	luchisher, where shows
MAINTAIN AN Set BACK)		
Authorized State Agent:	· Date: _ C	D2-14-07 SEE ATTACHEE
The issuance of this permit by the Health Department in no way	guarantees the issuance of other permits.	The permit holder is responsible for checking with appropriate gove
their requirements. This site is subject to revocation if the site p	an, plat, or the intended 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	nd Kules for Sewage Treatment and Dispos	sal and to conditions of this permit.
	Construction Auth	norization
	(Required for Building	
The construction and installation requirements of Rules 1950 15		g retriff() id .1959 are incorporated by references into this permit and shall b
installed in accordance with the attached system layout.	32, .1734, .1733, .1730, .1731, .1730. att	o 1737 are incorporated by references into this permit and shall be
ISSUED TO: CAMPEIL & CATEL	PROPERTY I	OCATION: 1141
	CHRINICION	The Jummit
Facility Type: SFN - 52X56 - YBR	JZÍ Nam 🗔 Evannia	n [] Denie
		n 🗌 Repair
Type of Wastewater System** 25% Red-cl	un 5gs. (Initial) V	Nastewater Flow: 485 GPD
(See note below, if applicable 🖾)		
320LF of	LYP	(Repair)
Installation Requirements/Conditions		
		9
Septic Tank Size <u>1000</u> gallons	Exact length of each trench 1>	210 feet Trench Spacing: 7
Pump Tank Size gallons	Trenches shall be installed on con-	tour at a Soil Cover: inches
•	Maximum Trench Depth of: 180	anches (Maximum soil cover shall not ex
	(Trench bottoms shall be level to	· ·
	in all directions)	To above the deficil bottom,
Pump Requirements:ft. TDH vs		
rump nequirementsit. IDN 45.	drn	A D d
6 - 11.1		Aggregate Depth:
Conditions:		
**If applicable: I understand the system typ	e specified is different from the typ	ne specified on the application. I accept the specification
Owner/Legal Representative Signature:		Date:
This Construction Authorization is subject to revocation if the site	plan, plat, or the intended use changes. Th	he Construction Authorization shall not be transferred when there is
of the site. This Construction Authorization is subject to compliance	with the provisions of the Laws and Rule	es for Sewage Treatment and Disposal and to the conditions of this
	AD C	Date: 02-14-012 Attion Expiration Date: 03-14-2012
Authorized State Agent: \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\		Date: $\boxed{0} \times \boxed{1} \times \boxed{0}$
		ation Expiration Date: 68-14-2012

Harnett County Department of Public Health Site Sketch

