## HTE# 07-5-16521RC Harnett Junty Department of Public Hearing

Improvement Permit

26464

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: ALPINE DO ISSUED TO: KENNETH CUMMINES SUBDIVISION SUMMIT LOT # 1114 Site Improvements required prior to Construction Authorization Issuance: REPAIR Type of Structure: SFO (63 X44) Proposed Wastewater System Type: CONVENTIONAL Projected Daily Flow: 360 Number of Occupants: Number of bedrooms: 3 Basement Yes No ☐ May be required based on final location and elevations of facilities Pump Required: Yes X No Type of Water Supply: 

Community Public Well Distance from well 100 feet Permit valid for: Five years ☐ No expiration Permit conditions: REHS SEE ATTACHED SITE SKETCH Authorized State Agent:: 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 governing bodies in meeting their requirements. This site is subject to revocation if the site plan, plat, or the intended use changes. The Improvement Permit shall not be affected by a change in ownership of the site. This permit is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit. Construction Authorization (Required for Building Permit) The construction and installation requirements of Rules .1950, .1954, .1954, .1955, .1956, .1957, .1958, and .1959 are incorporated by references into this permit and shall be met. Systems shall be installed in accordance with the attached system layout. Facility Type: SFD (63 X41X) New Expansion Repair

Basement? Yes No Basement Fixtures? Yes CONENTIONAL (Initial) Wastewater Flow: 360 Type of Wastewater System\*\* (See note below, if applicable 

) CONVENTIONAL Number of trenches 1 Installation Requirements/Conditions Septic Tank Size 1000 gallons Soil Cover: 24-6 Pump Tank Size \_\_\_\_\_ gallons Trenches shall be installed on contour at a Maximum Trench Depth of: 36-12 inches (Maximum soil cover shall not exceed (Trench bottoms shall be level to +/-1/4" 36" above the trench bottom) in all directions) Aggregate Depth: 2 inches below pipe Pump Requirements: \_\_\_\_\_\_ft. TDH vs. \_\_\_\_\_ GPM WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM ANY PART OF SEPTIC SYSTEM OR REPAIR AREA. NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD AREA. \*\*If applicable: I understand the system type specified is different from the type specified on the application. I accept the specifications of this permit. Owner/Legal Representative Signature: This Construction Authorization is subject to revocation if the site plan, plat, or the intended use changes. The Construction Authorization shall not be transferred when there is a change in ownership of the site. This Construction Authorization is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit. SEE ATTACHED SITE SKETCH Construction Authorization Expiration Date: 2)18/33 Authorized State Agent:

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## Harnett County Department of Public Health Site Sketch

PROPERTY LOCATON: ALFINE De

SUBDIVISION Symmit

Authorized State Agent: Date: 2/18/11

