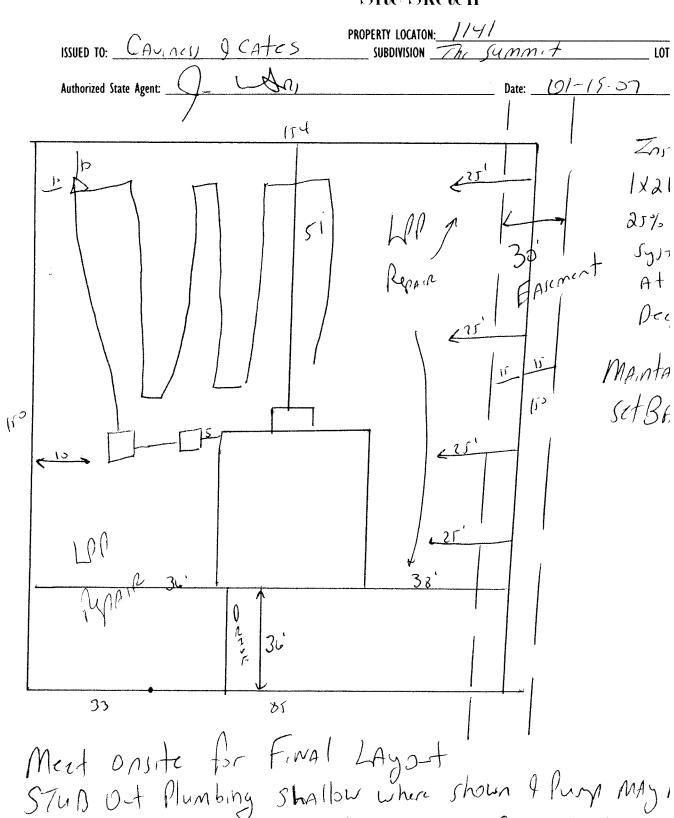
HTE# 07-50016522 Harnett County Department of Public Health 2360

Improvement Permit

\wedge	property location.
ISSUED TO: CAVINESS OCATES	PROPERTY LOCATION: 1141 SUBDIVISION The Summit
NEW Z REPAIR ☐ EXPANSION	
Type of Structure: SFO 50 x 53	4 BR
Proposed Wastewater System Type: 25% Ged-cfis	a system
Projected Daily Flow: 430 GPD	
Number of bedrooms: Number of Occupan	its:max
Basement □Yes 🔀 No	A
	d based on final location and elevations of facilities
Type of Water Supply: Community Public	Well Distance from well feet Permit valid for:
Permit conditions: 3140 321 Flynding	shallow (At grand fevel where shown) mel
25 from property line with e	d Meet anote for Final LAJOST Keep das
Authorized State Agent:	Date: 01-15-07 SEE ATTACHE
	guarantees the issuance of other permits. The permit holder is responsible for checking with appropriate government.
	n, plat, or the intended use changes. The Improvement Permit shall not be affected by a change in ownersh Id 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, .195	2, .1954, .1955, .1956, .1957, .1958, and .1959 are incorporated by references into this permit and shall
installed in accordance with the attached system layout.	
ISSUED TO: <u>CAUNCS</u> & CATES	PROPERTY LOCATION: // 4/
	subdivision The Jummit
Facility Type: SFO 50x50 Y3R	_ ⅓ New □ Expansion □ Repair
Basement? Yes No Basement Fixtur	res? 🗌 Yes 🔞 No
Type of Wastewater System** (So note helew if applicable 17)	Medication (Initial) Wastewater Flow: 480 GPD
THE HOLE DEROW, IL ADDRICADIE 18CT	1917KM
J25 LF -	1 LP (1 (Repair)
Installation Requirements/Conditions	
Septic Tank Size (000 gallons	Exact length of each trench $\cancel{1 \times 2} \bigcirc$ feet Trench Spacing: $\cancel{7}$ Fee
	Trenches shall be installed on contour at a Soil Cover: inche
1	Maximum Trench Depth of: <u>「8カイ</u> inches (Maximum soil cover shall not e
((Trench bottoms shall be level to +/-1/4" 36" above the trench bottom)
i	in all directions)
Pump Requirements:ft. TDH vs	GPM
• • • • • • • • • • • • • • • • • • • •	Aggregate Depth:
Conditions:	
**If applicable: I understand the system type	specified is different from the type specified on the application. I accept the specification
Owner/Legal Representative Signature:	Date:
This Construction Authorization is subject to revocation if the site pl	lan, plat, or the intended use changes. The 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 Rules for Sewage Treatment and Disposal and to the conditions of this
11 1 201	SEE ATTACHE
Authorized State Agent: 🕎 - 🕬)	Date: 01-19-07 Construction Authorization Expiration Date: 01-19-2012
	Construction Authorization Expiration Date: 01-17-2012

Harnett County Department of Public Health Site Sketch



Krindrainlines 25' from property Line with Easement Along, t