HTE# 07-5-16542

Harnett County Department of Public Health 24045 Improvement Permit

A building permit cannot be issued with only an Improvement Permit

—	PROPERTY LOC	ATION: SR 1440 Jam		>
ISSUED TO TOM DEVELOPERS.		AUTUMN POINT		LOT #!
NEW ☑ REPAIR □ EXPANSIO	Site Improvements required pri	Site Improvements required prior to Construction Authorization Issuance:		
• •				
Proposed Wastewater System Type:				
Projected Daily Flow: 360 GPD Number of bedrooms: 3 Number of Occup				
Number of bedrooms: 3 Number of Occup Basement □Yes □ No	ants: max			
	rad barad an final location and also	undiana of facilities		
Type of Water Supply: Community Public	red based on final location and elev		Danis wild for	T7 (T
Permit conditions:			Permit valid for:	☑ Five years ☐ No expiration
				C No expiration
Authorized State Agent: Pros EMANHA	HERS now	2-8 - 07	CFF ATTA	CUED OUT CHETCH
The issuance of this parmit by the Health Department in no way	Vare:		SEE ATTAI	CHED SITE SKETCH
The issuance of this permit by the Health Department in no way their requirements. This site is subject to revocation if the site p	guarantees the issuance of other perm	its. The permit holder is responsible	for checking with appropriate	governing bodies in meeting
permit is subject to compliance with the provisions of the Laws	and Rules for Sewage Treatment and Di	isposal and to conditions of this perm	s affected by a change in own	ersing of the site. This
, ,				
	Construction Au	uthorization		
	(Required for Build	ding Permit)		
The construction and installation requirements of Rules .1950, .1			rences into this permit and sh	all be met. Systems shall be
installed in accordance with the attached system layout.	_			
ISSUED TO: IOM DEVETOPERS I.		Y LOCATION: <u>5R/440 =</u>	TAMOS NORRU	s RD
		ION AUTUMN PURN	+	LOT # _ /
Facility Type: SFD	🗹 New 🖵 Expai	nsion 🗌 Repair		
Basement? Yes No Basement Fixt	ures? 🗆 Yes 🗹 No	•		
Type of Wastewater System** Convention	val(Initial)	Wastewater Flow: 360	GPD	
(C.,, I.I. 'f . P II F7)	,			
(see note below, if applicable) <u>Convention</u>	rel	(Repair)		
Installation Requirements/Conditions		(\F=)		
	/1 V			
Septic Tank Size / OOO gallons	$4X$ Exact length of each trench _	75 feet Trench	Spacing: 9	Faat on Cantar
Pump Tank Size gallons	Trenches shall be installed on o			ches
Tump runk size gunons	Maximum Trench Depth of:	- <i>1</i>	kimum soil cover shall no	
	(Trench bottoms shall be level	10 -1/4 30	' above the trench botton	m)
Done Brazilian de TDU	in all directions)		,	
Pump Requirements:ft. TDH vs	_ GPM		gate Depth: 2	inches below pipe
		Aggreg	gate Depth: 🔝 🛷	
Conditions:				inches total
**If applicable: I understand the system typ	e specified is different from the	type specified on the applicati	ion. I accept the specifica	ations of this permit.
Owner/Legal Representative Signature:			Date:	
Owner/Legal Representative Signature: This Construction Authorization is subject to revocation if the site	plan, plat, or the intended use change	s. The Construction Authorization shall	not be transferred when that	re is a change in ownership
of the site. This Construction Authorization is subject to compliant	e with the provisions of the Laws and	Rules for Sewage Treatment and Disp	osal and to the conditions of	this permit.
•	,		SEE ATTAI	THED CITE CRETCH
Authorized State Agent Jamo EM	what to see	Nata-	Z-8-17	
A Company	Construction Author	rization Eunivation Data:	7.0-17	

HTE#	17-5-	16542

Permit # <u>24045</u>

Harnett County Department of Public Health Site Sketch

	PROPERTY LOCATON: SA 1440 James Norms	ND
ISSUED TO: TOM DEVELOPENS INC	SUBDIVISION ANTONIA POTAT	LOT # <u>/</u>
Authorized State Agent James Markon	1012 Date: 2-8-07	

