HTE#07-5-16740

Harnett County Department of Public Health

24909

Improvement Permit

A	building permit cannot be issued with only an Improvement	t Permit
ISSUED TO: Hower Emaros	PROPERTY LOCATION: LEMUEL	
	SUBDIVISION GATENEST	LOT # <u>\\</u>
NEW REPAIR DEXPANSION Type of Structure: SEO (55 255)	N L Site Improvements re	quired prior to Construction Authorization Issuance:
Proposed Wastewater System Type: 25% REDUC	ivon statem	
Projected Daily Flow: 360 GPD		
Number of bedrooms: Number of Occup	pants:max	
Basement □Yes ☒ No		**************************************
Pump Required: ☐Yes ☐ No ※ May be requ	ired based on final location and elevations of facilities	_
Type of Water Supply: Community Public	☐ Well Distance from well 100 feet	Permit valid for: Five years
Permit conditions:		No expiration
11111		
	111	
Authorized State Agent:	Date: 6 18 68	SEE ATTACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guaranting is subject to reposition if the site along plats on the introduction	stees the issuance of other permits. The permit holder is responsible for ch	ecking with appropriate governing bodies in meeting their requirements. This
the Laws and Rules for Sewage Treatment and Disposal and to condition	nanges. The improvement Permit shall not be affected by a change in own	ership of the site. This permit is subject to compliance with the provisions of
and tales for sewage treatment and disposal and to condition	s or ans permit.	
	Construction Authorization	
	(Required for Building Permit)	
The construction and installation requirements of Rules .1950, .1952, .1		into this permit and shall be met. Systems shall be installed in accordance
with the attached system layout.	· ,	,
ISSUED TO: Homer Edwards	DRODERTY LOCATION E-ph	us Brock Pa
DOLD IO. ILOWETT GO MKSOS	PROPERTY LOCATION: LEM SUBDIVISION GATENES	VEL OFFICE ND
Facility Type: 550 (55×55)		72 # 101 # <u>1</u> 1
	New 🔲 Expansion 🗆 Repair	
Basement? Yes No Basement Fixe	tures? 🗆 Yes 🔃 No	
Type of Wastewater System** 25% R	EDUCTION SYSTEM	(Initial) Wastewater Flow: 360 GPD
(See note below, if applicable □)		
25% RE	DUCKION SYSTEM (Repair)	
Installation Requirements/Conditions	Number of trenches 1	
Septic Tank Size 1000 gallons		Trench Spacing: Feet on Center
	0	
Pump Tank Size gallons	Trenches shall be installed on contour at a	Soil Cover: inches
	Maximum Trench Depth of: 18 inches	(Maximum soil cover shall not exceed
	(Trench bottoms shall be level to +/-1/4"	36" above the trench bottom)
	in all directions)	·
Pump Requirements:ft. TDH vs	GPM	inches below pipe
	_	Aggregate Depth: inches above pipe
Conditions:		
conditions.		inches total
**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:		Date:
This Construction Authorization is subject to revocation if the site plan, p	lat, or the intended use changes. The Construction Authorization shall not b	se 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 condition	ons of this permit. SEE ATTACHED SITE SKETCH
	- Parameter and the control of the c	PARTICIPATION OF THE PROPERTY
Authorized State Agents	20	6/10
Authorized State Agent:	Construction Authorization Expiration D	alk lox
	Construction Authorization Expiration D	ate. 6/8/13

HTE#	0	-5-	147	40
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Permit # 24909

Harnett County Department of Public Health Site Sketch

		Site Sketch	
ISSUED TO: Howeve For		PROPERTY LOCATON: LEMVEL BLACK RO SUBDIVISION GARGNEST	LOT # <u>\\</u>
Authorized State Agent:	12/10/5	S (OLIVER TOLKSOORS) Date: 6 18 08	
		91'	
		10' SEWER ACCESS EASEMENT	
	25% RED. REPNIR AREA		
		P	
	28 1		
		55 x55	
		£ 20'_>	