HTE# 07-5-16746

Harnett County Department of Public Health 24098

Improvement Permit

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: LEMUEL BLACK RO ISSUED TO: HOWELL EDWARDS SUBDIVISION GAMEWEST NEW TREPAIR Type of Structure: SFD (60' ×60') Site Improvements required prior to Construction Authorization Issuance: Proposed Wastewater System Type: Pume To 25% REDUCTION Projected Daily Flow: 360 GPD Number of bedrooms: 3 Number of Occupants: 6 max Basement Yes No Pump Required: □Yes □ No May be required 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 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, .1952, .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. ISSUED TO: Hower EOWARDS PROPERTY LOCATION: LEMUEL BLACK RD Facility Type: SFO (60 × 60)

Basement? Yes No Basement Fixtures? Yes No Type of Wastewater System** Pume To 25% Reduction (Initial) SUBDIVISION GATEWEST ☐ Expansion ☐ Repair (See note below, if applicable □) Pume To 25% REQUOTION Installation Requirements/Conditions 3 TRENCHES Exact length of each trench ______ feet ___ Trench Spacing: _____ Feet on Center Septic Tank Size 1000 ___ gallons Pump Tank Size 1000 gallons Soil Cover: 📗 🔊 inches Trenches shall be installed on contour at a Maximum Trench Depth of: ______ 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 I understand the system type specified is different from the type specified on the application. I accept the specifications of this permit. **If applicable: 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. Construction Authorization Expiration Date: 9 2 7 Authorized State Agent:

HTE#	07-5-16746	
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Permit # _24098 Harnett County Department of Public Health Site Sketch

ISSUED TO: Hengel tox	PROPERTY LOCATON: LEMUEL BLACK RD SUBDIVISION GATEWEST 25 (OLIVER TOLKSDORE) Date: 91007	LOT # _2.\
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