HTE# 07-5-16747R

Harnett County Department of Public Health 24305

Improvement Permit

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: LEMUEL BLACK RO ISSUED TO HOWELL EDWARDS SUBDIVISION GATENEST NEW TX REPAIR 🖂 Site Improvements required prior to Construction Authorization Issuance: Type of Structure: SFD (65"× 55") Proposed Wastewater System Type: 25% REDUCTION SYSTEM Projected Daily Flow: 360 GPD Number of Occupants: 6 max Number of bedrooms: 3 Basement Yes Z No ☐ May be required based on final location and elevations of facilities Pump Required: ☐Yes Type of Water Supply: Community Dublic Well Distance from well 100 feet Permit valid for: Five years Permit conditions: ☐ No expiration Authorized State Agent:

Date: 8 24 07

SEE ATTACHED SITE SKETCH

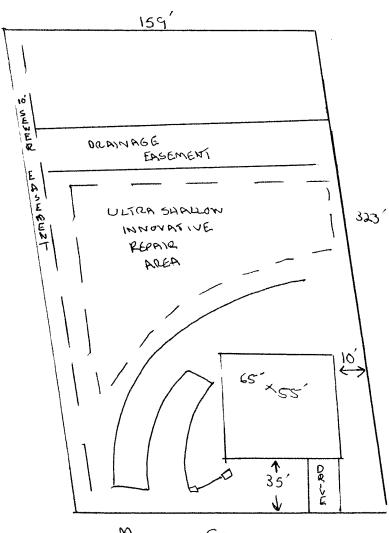
The issuance of this permit by the Health Department in no way guarantees be issuance of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This site is subject to revocation if the site plan, plat, or the intended use changes. 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, .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: HOWELL EOWPRDS PROPERTY LOCATION: LEMUEL BLACK RD SUBDIVISION GATENEST LOT # 22 New 🗆 Expansion 🗆 Repair Basement? Yes No ∑ No Basement Fixtures? | Yes 25% REDUCTION SYS. (Initial) Type of Wastewater System** Wastewater Flow: 360 GPD (See note below, if applicable \square) ULTERSHALLON 25% RED. SYS Installation Requirements/Conditions 1 TRENCH Exact length of each trench 300 feet Trench Spacing: 9 Feet on Center Septic Tank Size 1000 gallons Pump Tank Size _____ gallons Soil Cover: 6 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 Conditions: **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. Authorized State Agent: Construction Authorization Expiration Date: 82472

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Permit # <u>24305</u>

Harnett County Department of Public Health Site Sketch

	PROPERTY LOCATON: LEMUEL BLAC	× B
ISSUED TO: HOWELT COMPROS	SUBDIVISION GATENEST	LOT # 22
Authorized State Agent:	25 (OLIVER TOLKSOOF) Date: 8/20	107



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