HTE# 07-5-16751R

Harnett County Department of Public Health

Improvement Permit

26739

A	building permit cannot be issued with only an Improvement	
ISSUED TO: BILL CLARK HOM	PROPERTY LOCATION: LEMVES SUBDIVISION GATEWEST	_ DLACX FD LOT # 26
NEW REPAIR TO EXPANSION		quired prior to Construction Authorization Issuance:
Type of Structure: 5FD (60'x35")	in Discontinuity is	quired prior to construction Authorization issuance:
Proposed Wastewater System Type: 25% Dec	UCTION SYSTEM	
Projected Daily Flow: GPD GPD		
Number of bedrooms: Number of Occu	pants: _ Cmax	
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 Permit conditions:	☐ Well Distance from well <u>\○○</u> feet	Permit valid for:
	0036	
Authorized State Agent::	12673 Date: 11 23 11	SEE ATTACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guarantees the 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 Sermit 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)	
with the attached system layout.		into this permit and shall be met. Systems shall be installed in accordance
ISSUED TO: BILL CLARK Home	PROPERTY LOCATION: LES	NEZ BLACE RO
Facility Type: SFO (60'x35')	20RDIAIZION PULEMER	TLOT # <u>26</u> _
	New □ Expansion □ Repair	
Basement? Yes No Basement Fix	tures? Tyes No BOUCTION SYSTEM	310
Type of Wastewater System** 25% R	EOUCTION SYSTEM	(Initial) Wastewater Flow: GPD
(See note below, if applicable □)	C0/ 0	
	5% REOVERION (Repair)	
Installation Requirements/Conditions	Number of trenches	6
Septic Tank Size <u>\OO O</u> gallons	Exact length of each trench 3-30 feet	Trench Spacing: Feet on Center
Pump Tank Size gallons	Trenches shall be installed on contour at a	Soil Cover: G inches
•	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)	30 above the trench bottom)
Pump Requirements:ft. TDH vs		
tamp requirementsit. 1011 vs	_ 0111	inches below pipe
Conditions		Aggregate Depth: inches above pipe
Conditions:		inches total
WATER LINES (INCLUDING IRRIGATION) MUST B	E 10FT. FROM ANY PART OF SEPTIC SYSTEM OR F	REPAIR AREA.
NO UTILITIES ALLOWED IN INITIAL OR REPAIR D	RAIN FIELD AREA.	
**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:		
Owner/Legal Representative Signature:		
Construction Authorization is subject to compilance with the provision of the Laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit. SEE ATTACHED SITE SKETCH		
The state of the s		
Authorized State Agent: Date: 11 23 11		
Construction Authorization Expiration Date: 123/16		

Harnett County Department of Public Health Site Sketch

Authorized State Agent:

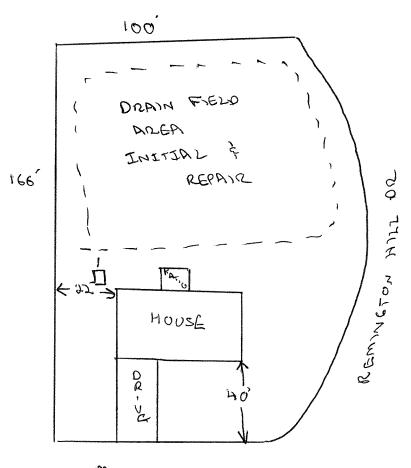
PROPERTY LOCATON: LEMVEL BLACK RO

SUBDIVISION GATEWEST LOT # 26

PROPERTY LOCATON: LEMVEL BLACK RO

LOT # 26

OLIVER TOLKSSORE Date: 11 23 16



MOSSBURG CT