HTE# 07-5-1675)

Harnett County Department of Public Health

24914

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

ISSUED TO: HOWELL EDWARDS NEW REPAIR EXPANSION Site Improvements required pr	
NEW Site Improvements required or	LOT # 26
Type of Structure: SEO (65 XCM)	rior to Construction Authorization Issuance:
Type of structure.	
Proposed Wastewater System Type: 25% REDUCTION SYSTEM	
Projected Daily Flow: 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
Authorized State Agent:: Date: C 18 08	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 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 Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.	appropriate governing bodies in meeting their requirements. This he site. This permit is subject to compliance with the provisions of
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 p with the attached system layout.	permit and shall be met. Systems shall be installed in accordance
ISSUED TO: HONELL EDWARDS PROPERTY LOCATION: LEMUEL SUBDIVISION GATEMENT	BLACK RD
SUBDIVISION GATEWEST	LOT # <u>~</u> &
Facility Type: SFD (65~50) New Expansion Repair	
Basement? Yes No Basement Fixtures? Yes No	
Type of Wastewater System** 25% REDUCTION SYSTEM (Ini	itial) Wastewater Flow: GPD
(See note below, if applicable)	
Installation Requirements/Conditions Number of trenches	
	Spacing: Feet on Center
De total de la companya de la compan	over: 6 inches
	ximum soil cover shall not exceed
· · · · · · · · · · · · · · · · · · ·	XIIIIUIII SOII COVET SIIAII NOT EXCEED
•	" above the trench bottom)
in all directions)	" above the trench bottom)
Pump Requirements:ft. TDH vs GPM	" above the trench bottom) inches below pipe
Pump Requirements:ft. TDH vs GPM	" above the trench bottom)
Pump Requirements:ft. TDH vsGPM Aggree	" above the trench bottom) inches below pipe gate Depth: inches above pipe inches total
in all directions) Pump Requirements:ft. TDH vs GPM Aggrey	" above the trench bottom) inches below pipe gate Depth: inches above pipe inches total
Pump Requirements:ft. TDH vsGPM Aggrey Conditions: **If applicable: I understand the system type specified is different from the type specified on the application. I accept	" above the trench bottom) inches below pipe gate Depth: inches above pipe inches total or the specifications of this permit.
Pump Requirements:ft. TDH vsGPM Aggrey Conditions: **If applicable: I understand the system type specified is different from the type specified on the application. I accept	" above the trench bottom) inches below pipe gate Depth: inches above pipe inches total or the specifications of this permit.
Pump Requirements:ft. TDH vsGPM Aggree Conditions: **If applicable: / understand the system type specified is different from the type specified on the application. I accept 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.	" above the trench bottom) inches below pipe gate Depth: inches above pipe inches total of the specifications of this permit. Date: ed when there is a change in ownership of the site. This
Pump Requirements:ft. TDH vsGPM Aggrey Conditions: **If applicable: I understand the system type specified is different from the type specified on the application. I accept	" above the trench bottom) inches below pipe gate Depth: inches above pipe inches total of the specifications of this permit. Date: ed when there is a change in ownership of the site. This
In all directions) Pump Requirements:ft. TDH vsGPM Aggree Conditions: **If applicable: / understand the system type specified is different from the type specified on the application. I accept 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.	" above the trench bottom) " inches below pipe gate Depth: inches above pipe inches total " the specifications of this permit. Date: ed when there is a change in ownership of the site. This permit. SEE ATTACHED SITE SKETCH

HTE# 🔿	-5-1671	51
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Permit # 24914

Harnett County Department of Public Health Site Sketch

PROPERTY LOCATON: LEMUEZ BLACK RG)
ISSUED TO: HOWELL EDWARDS SUBDIVISION COMEWEST	LOT # 26
Authorized State Agent: Date: 6 18 08	,

