

HTE# 07-516760

Harnett County Department of Public Health

24915

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

ISSUED TO: HOWELL EDWARDS PROPERTY LOCATION: LEMUEL BRACK RD
 NEW REPAIR EXPANSION SUBDIVISION: GATEWEST LOT # 38
 Type of Structure: SFD (60x50) Site Improvements required prior to Construction Authorization Issuance:
 Proposed Wastewater System Type: PUMP TO 25% RGD ULTRA SHADOW 14' DRIVE ONLY ALONG SIDE OF LOT - SEE
 Projected Daily Flow: 360 GPD SITE SKETCH
 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: [Signature] Date: 6/17/08 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 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: _____ PROPERTY LOCATION: _____
 SUBDIVISION _____ LOT # _____
 Facility Type: _____ New Expansion Repair
 Basement? Yes No Basement Fixtures? Yes No
 Type of Wastewater System** _____ (Initial) Wastewater Flow: _____ GPD
 (See note below, if applicable) _____ (Repair)

Installation Requirements/Conditions

Septic Tank Size _____ gallons	Number of trenches _____	
Pump Tank Size _____ gallons	Exact length of each trench _____ feet	Trench Spacing: _____ Feet on Center
	Trenches shall be installed on contour at a	Soil Cover: _____ 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)	
Pump Requirements: _____ ft. TDH vs. _____ GPM		_____ inches below pipe
		Aggregate Depth: _____ inches above pipe
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, 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. SEE ATTACHED SITE SKETCH

Authorized State Agent: _____ Date: _____
Construction Authorization Expiration Date: _____

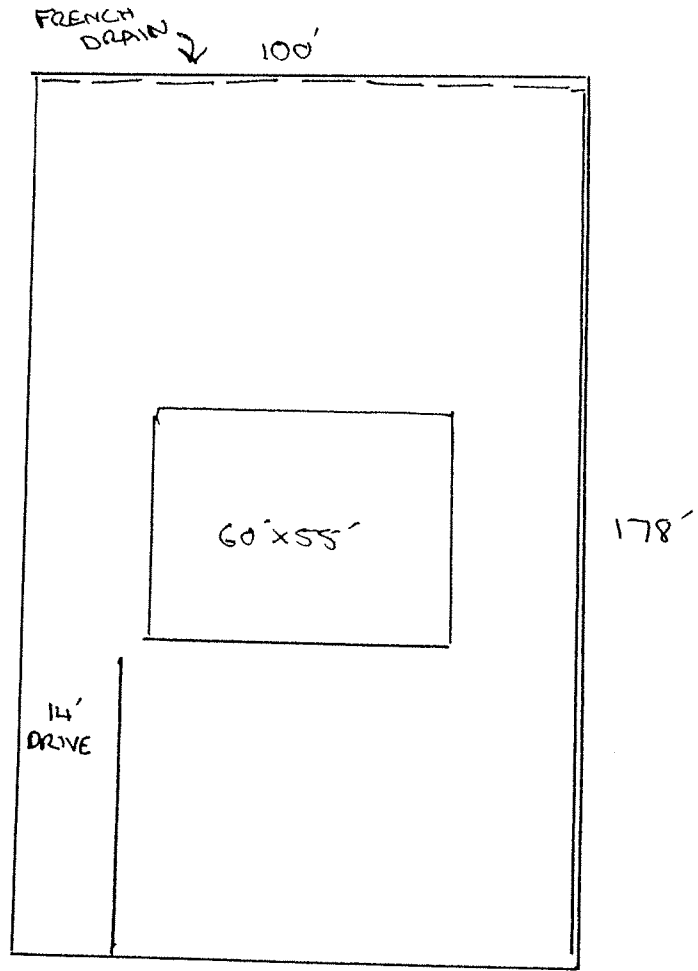
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Harnett County Department of Public Health Site Sketch

ISSUED TO: HOWELL EDWARDS PROPERTY LOCATOR: LEMUEL BLACK RD
SUBDIVISION GATEWEST LOT # 38

Authorized State Agent: _____ Date: _____



* CA + REMAINDER OF SITE SKETCH TO BE ISSUED AFTER DRIVE SITE IS VERIFIED BY HCHD

