HTE# 07-5 16823 Har.... County Department of Public ...alth 23721

Improvement Permit

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: STZ SELAS HAYES SUBDIVISION HUNTERS POINT Site Improvements required prior to Construction Authorization Issuance: Type of Structure: SFD Proposed Wastewater System Type: Projected Daily Flow: 360 GPD Number of bedrooms: _____ Number of Occupants: _____ max Basement Yes May be required based on final location and elevations of facilities Pump Required: ☐Yes ☐ No Five years Permit valid for: Permit conditions: ■ No expiration 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. PROPERTY LOCATION: SR Salas Honges
SUBDIVISION HUNTERS POINT LOT # 4 ISSUED TO: DANNY/ LVANS FOR Facility Type: ____ 5FD Expansion Repair Basement? Yes No Basement Fixtures?

Yes ☐ No 25% REDUCTION Syster (Initial) Type of Wastewater System** Wastewater Flow: 360 GPD (See note below, if applicable

) 25% REDUCTION System (Repair) Installation Requirements/Conditions 3 X Exact length of each trench 80 feet Trench Spacing: 9 Feet on Center Septic Tank Size _/OOO gallons Pump Tank Size gallons Trenches shall be installed on contour at a Maximum Trench Depth of: 28 -> 18 inches (Maximum soil cover shall not exceed (Trench bottoms shall be level to +/-1/4" 36" above the trench bottom) in all directions) Aggregate Depth: 2 inches below pipe inches above pipe Pump Requirements: _____ ft. TDH vs. Conditions: 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. Authorized State Agent: Date: 2-21-07

Construction Authorization Expiration Date: 2-21-12 SEE ATTACHED SITE SKETCH

Harnett County Department of Public Health Site Sketch

