HTE# 07-5-16834

Har t County Department of Public nealth 23477

Improvement Permit

A building permit of	annot be issued wit	th only an Improvement	Permits 1 - Cl. 1 - P	0
ISSUED TO: Donald Bunting	PROPERTY LOCA	Magnetic	Crest	LOT # /C
NEW □ REPAIR □ , EXPANSION □	300011131011 _	Site Improvements requ	uired prior to Construction Author	
Type of Structure: SFD 47X52'				
Proposed Wastewater System Type: Accepted System				
Projected Daily Flow: 480 GPD				
Number of bedrooms: Number of Occupants:	max			
Basement □Yes ☑ No □ May be required based on fina	al location and alov	ations of facilities		
Pump Required: ☐Yes ☐ No ☐ May be required based on fina Type of Water Supply: ☐ Community ☐ Public ☐ Well Dis			Permit valid for:	Five years
Permit conditions:			remit valid for.	☐ No expiration
Andreit Cont. Acres	D		CCC 477	TACHED CITE CHETCH
Authorized State Agent:: The issuance of this permit by the Health Department in no way guarantees the iss		its. The nermit holder is re-		TACHED SITE SKETCH
their requirements. This site is subject to revocation if the site plan, plat, or the in				
permit is subject to compliance with the provisions of the Laws and Rules for Sewa				
-		4		
<u>cons</u>	truction Au	<u>ıthorization</u>		
	Required for Build			
The construction and installation requirements of Rules .1950, .1952, .1954, .1955, installed in accordance with the attached_system,layout.	.1956, .1957, .1958.	. and .1959 are incorporate	ed by references into this permit and	shall be met. Systems shall be
ISSUED TO: Donald Bunting	PROPERT	Y LOCATION: CALL	447 Paule Cl	h Rd.
issue to	SUBDIVIS	ION Masos	a Crest	101 # /6
Facility Type: JFD 47 X52 New	w	nsion Renair	447 Rowls Cla a Crest	cor ir · · ·
Basement? Yes No Basement Fixtures? Yes		ізіон 🗀 перап		
Type of Wastewater System** Accepted	(Initial)	Wastewater Flow: _	480 GPD	
(See note below, if applicable)				
Accepted		(Repair)		
Installation Requirements/Conditions		-		
1200			0	
Septic Tank Size gallons	of each trench 3	feet feet	Trench Spacing: 9	_ Feet on Center
	l be installed on			inches
			(Maximum soil cover shall	
(Trench botto	oms shall be level	to +/-1/4"	36" above the trench bot	ttom)
in all direction	ons)			
Pump Requirements:ft. TDH vs GPM				inches below pipe
0 111	110 N ==	0-0-10 01	Aggregate Depth:	inches above pipe
Conditions: Ron ditcher on contour t	DE DEE	the than 2	4 inches	inches total
**If applicable: I understand the system type specified is	different from the	type specified on the	application. I accept the speci	fications of this permit.
Owner/Legal Representative Signature:			Date:	Liet vill
This Construction Authorization is subject to revocation if the site plan, plat, or the				
of the site. This Construction Authorization is subject to compliance with the provis	ions of the Laws and	Rules for Sewage Treatmen		
Authorized State Agent: Super Miliam, R.		Α	3 / (200) SEE A	TACHED SITE SKETCH
Authorized State Agenti	notunation Austr	Date:	3/16/2007 SEE AL	 '
10	DISTRUCTION AUTHO	I norterior rypiration l	MIB. 7//6/70/7	

Harnett County Department of Public Health Site Sketch

	PROPERTY LOCATOR	:5R 1447	Lowb Clob Rd	
ISSUED TO: Donald Bunting	SUBDIVISION	Magnolia (Crest LO	T#_/(
Authorized State Agent:	Join R.S.	Date:	3/16/2007	

* Septic Contractor to meet on site prior to installing system to varify MAx ditch pepths





