HTE# 07-5-1695QR

Harnett County Department of Public Health

24733

Improvement Permit

	,	A bulluing perione calli	PROPERTY LOCATIO			R1565	
ISSUED TO: SHC 170	L01465 /A	16	SUBDIVISION Y			K 10 9	LOT # 16
NEW TS REPAIR □	FYPANCI		-		required prior to Cons	struction Authori	
Type of Structure: SEO (L	10×60')						
Proposed Wastewater System Type:	Pume To 250	· KEDUCTIONS	ISTEM				
Projected Daily Flow: 360	<u>⊃</u> GPD	_			***************************************		
Number of bedrooms: 3	Number of Occu	ıpants:	max				
Basement Tyes X No							
Pump Required: XYes No		uired based on final lo	cation and elevation	ns of facilities	_		\
Type of Water Supply: Commu Permit conditions:	mity 25 rubic	□ Weil Distanc	te from well	reet	Perm	nit valid for:	Five years
Territe conditions.				·			☐ No expiration
		7					
Authorized State Agent::		1 25	Date: 5	12/08		SEE ATT/	ACHED SITE SKETCH
The issuance of this permit by the Health D site is subject to revocation if the site plan, the Laws and Rules for Sewage Treatment at	plat, or the intended use	changes. The Improvement I	permits. The permit hol Permit shall not be affec	der is responsible for ted by a change in o	checking with appropriate properties of the site. This p	governing bodies in	meeting their requirements. This
			uction Auth				
The construction and installation requiremen	to of Bulon 1000 1007		uired for Building		and the second of the second		
The construction and installation requiremen with the attached system layout.	15 OF NUIES .1730, .1732, .	1734, .1733, .1730, .1731,	.1730. and .1737 are in	corporated by reference	es into this permit and sha	ill be met. Systems	shall be installed in accordance
ISSUED TO:SHC_HOD	-101MGS IN	<u>-</u>	PROPERTY LO	CATION: SIL	AS HAVES	LD SR	1545
1112	(-7)		SUBDIVISION	HUNTER	5 POINT		LOT # <u>\</u>
Facility Type: SFO LHO'X			Expansion	🗌 Repai	r		
Basement? Yes N		ktures? 🔲 Yes 🕟					
Type of Wastewater System**	Pume 10	25% DEOU	3/0N 2/2	TEM	(Initial) Wast	ewater Flow: _	<u>360</u> GPD
(See note below, if applicable	Pume To	25% REOVE	on Systemif	lepair)			
Installation Requirements/Condition		Number of trench		' /			
Septic Tank Size 1000	gallons	Exact length of e	ach trench _ 🔾	60 feet	Trench Spacing:	9	Feet on Center
Pump Tank Size	•	Trenches shall be			Soil Cover:	Ç ir	nches
•	- 0		Depth of:\S			l cover shall n	
			shall be level to		36" above th		
		in all directions)					<i>,,</i>
Pump Requirements:	ft. TDH vs.	,					inches below pipe
1 1		-			Aggregate Denti),	inches above pipe
Conditions:							inches total
**If applicable: / understand the s	svetam tvna enacifia	d is different from to	ha tuna enacified	an the application	on I account the case	eiGratiana of A	
unit	ysiem type specimee	, is unicione nom th	n type specimed e	лі інс аррпсано	n. r accept the spec	.iiicativiis vi tii	ns permin.
Owner/Legal Representative Signa This Construction Authorization is subject to r	ture:				Dat	e:	
						-	· ·
Construction Authorization is subject to compl	rance with the prexisions	the Laws and Rules for Se	wage Ireatment and Dis	posal and to the cond	itions of this permit.	SEE A	TTACHED SITE SKETCH
					.1 1		
Authorized State Agent:	4 1	in il re)	Date:	5/12/08		
		Constru	action Authorizat	ion Expiration	5 12 08 Date: 5/12/1	3	

Harnett County Department of Public Health Site Sketch

	Site Sketch
ISSUED TO: SIXC HOLDINGS IN	PROPERTY LOCATON: SILAS HAYES RO SR1565 SUBDIVISION HUNTERS POINT LOT # 16
Authorized State Agent:	85(01VER TO 125000) Date: 5/12/08
	145
$\mathcal{D}_{\mathcal{M}}$	PUMP TO SEE REDUCTION PUMP TO SEPAIR HOOSE B R SS E SE S