HTE# 07-5-6966 Rez Harnett County Department of Public Health

29620

Improvement Permit

A building permit cannot be issued with only an Improvement Permit
PROPERTY LOCATION: 5×1565 JULAS Hoges AD
ISSUED TO: STANCEL BIDRS PROPERTY LOCATION: 5×1565 50/AS Horges AD SUBDIVISION HUNTERS Point LOT #39/40
NEW REPAIR EXPANSION Site Improvements required prior to Construction Authorization Issuance:
Type of Structure: <u>SED</u>
Proposed Wastewater System Type: 2503 Nocluster
Projected Daily Flow: 360 GPD
Number of bedrooms: Number of Occupants: 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 feet Permit valid for: 🗗 Five years
Permit conditions:
Mal Aca NSUS
Authorized State Agent: 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 (1) 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.
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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: STANKEL BIDRE	5 PROPERTY LOCATION; <u>Sal</u>	565 SilAS HALVES RD
	SUBDIVISION Huntes	15 Point 101 #39/40
Facility Type:	_ 🗹 New 🖵 Expansion 🗖 Repair	
Basement? 🗆 Yes 🗹 No Basement Fixtu	ures? 🗆 Yes 🗹 No	
Type of Wastewater System**	252 Reduction	(Initial) Wastewater Flow: <u>360</u> GPD
(See note below, if applicable)		
FLP to	252 Noch (Repair)	
Installation Requirements/Conditions	Number of trenches	9
Septic Tank Size <u>1000</u> gallons Pump Tank Size <u>1000</u> gallons	Exact length of each trench $\underline{80}$ feet	Trench Spacing: Feet on Center
Pump Tank Size 1000 gallons	Trenches shall be installed on contour at a	Soil Cover: <u>6</u> inches
,	Maximum Trench Depth of: <u>1211</u> inches	(Maximum soil cover shall not exceed
	(Trench bottoms shall be level to $+/-1/4$ "	36" above the trench bottom)
	in all directions)	1
Pump Requirements:ft. TDH vs	_ GPM	inches below pipe
/ 11	2	Aggregate Depth: inches above pipe
Conditions: Le COVEIL	REQUERED.	inches total

WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM ANY PART OF SEPTIC SYSTEM OR REPAIR AREA. NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD AREA.

**If applicable: I understand the system type specified is different from the type specified on the application. I acc	cept 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 transfe	ferred 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 the	this permit. SEE ATTACHED SITE SKETCH
Authorized State Agent: Date:	10-24-17 10-24-22

HTE# 07-5-6966RRR Permit # 29620 Harnett County Department of Public Health Site Sketch ISSUED TO: STANCE BIDTES IN SUBDIVISION HONTEN DONE LOT # 31/40 Authorized State Agent: Jones & Manhan Mar 2503 Date: 10-24-17 DD Si 30 AMORADE Repair SFD 36 62 c-49:-7 D 52' W STREET