

HTE# 07-5-17017

Harold County Department of Public Health

23480

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

ISSUED TO: Stephenson Builders, Inc.

PROPERTY LOCATION: SR 1429 Chalybeater Rd
SUBDIVISION Dexterfield LOT # 39

NEW REPAIR EXPANSION

Site Improvements required prior to Construction Authorization Issuance:

Type of Structure: SFD 64'x58'

Proposed Wastewater System Type: Accepted System

Projected Daily Flow: 360 GPD

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 _____ feet

Permit valid for: Five years
 No expiration

Permit conditions: _____

Authorized State Agent: Bryan McSwain, R.S.

Date: 3/23/2007

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: Stephenson Builders, Inc.

PROPERTY LOCATION: SR 1429
SUBDIVISION Dexterfield LOT # 39

Facility Type: SFD 64'x58' New Expansion Repair

Basement? Yes No Basement Fixtures? Yes No

Type of Wastewater System** Accepted (Initial) Wastewater Flow: 360 GPD

(See note below, if applicable) Accepted (Repair)

Installation Requirements/Conditions

Septic Tank Size 1000 gallons

Pump Tank Size _____ gallons

Exact length of each trench 1x300 feet

Trenches shall be installed on contour at a
Maximum Trench Depth of: 12-15 inches
(Trench bottoms shall be level to $\pm 1/4$ "
in all directions)

Trench Spacing: 9 Feet on Center

Soil Cover: 6" min inches
(Maximum soil cover shall not exceed
36" above the trench bottom)

Pump Requirements: _____ ft. TDH vs. _____ GPM _____ inches below pipe

Aggregate Depth: _____ inches above pipe

Conditions: Stub plumbing out shallow so that Ditch depths can be maintained if not pump will be required _____ 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.

Authorized State Agent: Bryan McSwain, R.S.

Date: 3/23/2007

SEE ATTACHED SITE SKETCH

Construction Authorization Expiration Date: 3/23/2012

HTE# 07-5-1707

Permit # 23450

Harnett County Department of Public Health Site Sketch

ISSUED TO: Stephenson Builders, Inc PROPERTY LOCATOR: SR1429 Chalybeate Rd
 SUBDIVISION Dexterfield LOT # 39
 Authorized State Agent: Bryan McLean, R.S. Date: 3/23/2007

- * Call with any questions prior to installing system
- * Ditches run on 9 ft. centers 12-15 inch Ditch Depth
- * Min. of 6" of cover over system

