HTE# 07-5-17135

## Harnett County Department of Public health 23763 Improvement Permit

improvement remite

	A	building permit C		TATION: TR 1755	OID FAIRG	RAUNA	ZO
ISSUED TO BIM B	UILdens		SUBDIVISION	.ATTON. <u>514,105</u>	0 17 112 10	100,419	LOT # 1
NEW REPAIR		ON 🗆		Site Improvements re	equired prior to Construc	tion Authoriza	
Type of Structure: 5F				- P			
Proposed Wastewater System Type:	CONVENTION	al					
Projected Daily Flow: 480					Printer to	4.05.07	
Number of bedrooms: 4	Number of Occu	pants: 8	max			18 3	
Basement 🗆 Yes 🗆 No							La de de la compansión de
Pump Required: □Yes ☑ No	May be requ	ired based on fina	al location and ele	vations of facilities			1
Type of Water Supply:   Comm	unity Public	☐ Well Dis	tance from well _	50+ feet	Permit v	alid for:	Five years
Permit conditions:					A POR		☐ No expiration
			lik	-			
Authorized State Agent Jame	cm.	10-10	<u>P</u>	3-21-07		CEE ATTA	THEN CITE CVETCH
9		ZV			ible for sheeking wit		CHED SITE SKETCH
The issuance of this permit by the He their requirements. This site is subject							
permit is subject to compliance with t						change in own	lership of the site. This
permit is subject to compinance with t	are provisions or the tarr	, and notes for seria	ge reatment and b	isposar and to conditions t	and permit		
The second		Cana	truction A	utharization			6
		COUR	truction A	<u>uthorization</u>			
		(	Required for Bui	lding Permit)			
The construction and installation requi		.1952, .1954, .1955,	.1956, .1957, .195	8. and .1959 are incorpora	ated by references into this	permit and sh	nall be met. Systems shall be
installed in accordance with the attack	ned system layout.						
ISSUED TO: BIM BU	rldens		PROPER	TY LOCATION: ムア 1	705 OID FAIL	COROUN	NO RD
		/	SUBDIVI	SION	111		LOT #/
Facility Type: 5F1	)	₩ Ne	w 🗆 Expa	nsion 🗆 Repair			
Basement?  Yes	No Basement Fix	xtures?    Yes	No				
Type of Wastewater System**	Conventro	NAI	(Initial)	Wastewater Flow:	480 GPD		
(See note below, if applicable I							
(чес него этом, и арричание	259012FD	(KTIM)	Sistem	(Repair)			
Installation Requirements/Condit	tions	0-1010	SYSVEIN	(nepair)			
mistanation nequirements contin	uons		4 x				
Seedin Teals Con. 17 AA		For at least	4 1	/^^	Tours Consider	9	Court of Courts
	gallons		of each trench _		Trench Spacing:	,	Feet on Center
Pump Tank Size	gallons		be installed on		Soil Cover:	-	nches
			nch Depth of: _				
		(Trench botto	ms shall be level	to +/-1/4"	36" above the	trench botto	om)
		in all direction	ins)				
Pump Requirements:	ft. TDH vs	GPM				6	inches below pipe
					Aggregate Depth:	2	inches below pipe inches above pipe
Conditions:					00 0	1	inches total
**If applicable: / und	derstand the system	type specified is	different from th	e type specified on th	e application. I accept	the specific	cations of this permit
п аррисане.	terstand the system t	The specified is	umerent nom ur	e type specified on th	е аррисации. Тассери	the specific	ations of this perimit.
Owner/Legal Representative Sign	nature:				Data:		
Owner/Legal Representative Sign This Construction Authorization is subj	nature.	in also also self	intended I	The Construction A. d.	vale.		an is a decay in succession
of the site. This Construction Authorization is subj	ect to revocation if the s	ne plan, plat, or the	ions of the laws an	ges. The Construction Author	orization shall not be transf	erred when the	this permit
or the site. This construction Admoniz		2		3	ent and Disposal and to th		ACHED SITE SKETCH
	52	Markan	ADN.	2	2-11-07	JLE AIII	ACILLO SILL SKEICH

Construction Authorization Expiration Date: 2-21-2012

## Harnett County Department of Public Health Site Sketch

	PROPERTY LOCATON: 5/2	1705 014	FACUSTON	DRO
ISSUED TO: BIM BUTIDERS	SUBDIVISION			_ LOT # _/
Authorized State Agenti James Mark	ant ons.	Date:	3-21-07	

ONSITE PLUM TO MEST ENSTAIL.

System IS FLAGGETS LAYOUT VISIBLE

+ permet for



