HTE#<u>07-5-17168</u>

## Harnett County Department of Public Health 23771

**Improvement Permit** 

	A building permit cannot be issued with only an Improveme	nt Permit	
ISSUED TO: BIM BUTIDERS /	PROPERTY LOCATION: 5R1705  SUBDIVISION WELLOWBRO	Mangio GIU	
NEW ☐ REPAIR ☐ EXPAN			LOT # <u>/ 5</u>
Type of Structure: SFD	Site improvements	required prior to Construction Authori	zation issuance:
Proposed Wastewater System Type: 25% (257)	vction System		
Projected Daily Flow: 360 GPD	7		
Number of bedrooms: 3 Number of Oc	cupants: max		
Basement Yes No			
Pump Required: □Yes □ No ☑ May be re	quired based on final location and elevations of facilities		
Type of Water Supply:   Community Public	☐ Well Distance from well feet	Parmit valid for	
Permit conditions:	Teet	Permit valid for:	Five years
			☐ No expiration
į į	10.19		
Authorized State Agent amos MA	when two Date: 4-3-07	) SEE ATTA	ACHED SITE SKETCH
The issuance of this permit by the Health Department in no	way guarantees the issuance of other nermits. The nermit holder is	responsible for checking with appreciate	and the back of the state of
then redunements. This site is subject to tead(4000 it the sit	e plan, plat, or the intended use changes. The Improvement Permit	shall not be affected by a change in our	nership of the site. This
permit is subject to compliance with the provisions of the Law	ws and Rules for Sewage Treatment and Disposal and to conditions	of this permit.	or the site. This
	<b>Construction Authorization</b>		
The construction and installation requirements of Rules 1950	(Required for Building Permit) .1952, .1954, .1955, .1956, .1957, .1958, and .1959 are incorpora		
installed in accordance with the attached system layout.	1772, 1773, 1773, 1773, 1773, 1773, and 1773 are incorpora	ted by references into this permit and st	nall be met. Systems shall be
ISSUED TO: BIM BUTIDENS U	C PROPERTY LOCATION: < 1.73	and Commerce , DAA	
	CURDIVICION / 3-//- 16-	05 fragional ND	
Facility Type:SFQ	New □ Expansion □ Repair	or	LOT # <u>/s</u>
	/		
Type of Westernstein Custometh (CM) (2/2)	xtures? Tyes No		
Type of Wastewater System** 25% 1260000	(Initial) Wastewater Flow:	<u> 360 </u> GPD	
(See note below, if applicable □)	,		
25%illed	UCTUS System (Repair)		
Installation Requirements/Conditions	•		
	4 X		
Septic Tank Size <u>/060</u> gallons	Exact length of each trench 90 feet	Trench Spacing:	Feet on Center
Pump Tank Size gallons	Trenches shall be installed on contour at a	- · · -	
		Soli cover. 6 In	ches
	Transh between shall be be a first inches	(Maximum soil cover shall no	
	(Trench bottoms shall be level to +/-1/4"	36" above the trench botton	m)
Juma Daguinamanta. 6. This	in all directions)		
ump Requirements:ft. TDH vs	GPM	Aggregate Depth: 2	inches below pipe
		Aggregate Depth: 2	inches above pine
onditions:			Z inches total
*If applicable: I understand the system ty	ype specified is different from the type specified on the	application. I accept the specifica	tions of this permit.
wner/Legal Representative Signature:	te plan, plat, or the intended use changes. The Construction Authorize	Date:	
is Construction Authorization is subject to revocation if the sit	te plan, plat, or the intended use changes. The Construction Authori	ration shall not be transferred when there	e is a change in ownership
the site. This Construction Authorization is subject to complia	nce with the provisions of the Laws and Rules for Sewage Treatmen	and Disposal and to the conditions of t	his permit.
	11 18	CEE ATTAC	HED CITE CYETCH
uthorized State Agent: James	Manhant Data.	4-7-1	wit subjui
	Construction Authorization Expiration D	1-3-0/	
$\mathcal{U}$	CONSTRUCTION MUTHORIZATION EXPIRATION D	ate. 4-5-14	_

HTE# <u>07-5-17/68</u>	HTE#	07-5-	171	6	රි	
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## Harnett County Department of Public Health Site Sketch

ICCURD TO RTIMA R -10- 110	PROPERTY LOCATION: SC1705 FATTLESMOUNDE	d RO
ISSUED TO: BIM BUTHERS LLC	SUBDIVISION WEllowbrook	LOT # _/5
Authorized State Agent James & Monda	mfers Date: 4-3-0	7

