HTE#07-5-17352

Harnett County Department of Public Health 23884

Improvement Permit

	A building permit cannot be issued with o		
ISSIED TO: TRAINS WERE 11 am	PROPERTY LOCATION	N: Oup US 42]	
ISSUED TO: TROUS WERR HOME NEW REPAIR EXPANS			LOT # <u>&&</u>
NEW REPAIR DEXPANS Type of Structure: SPD (51"x 60")	ON 🗆 Sin	te Improvements required prior to Construct	tion Authorization Issuance:
Proposed Wastewater System Type: Correct to	NPL		
Projected Daily Flow: 360 GPD	Joants: 6 max		
Number of bedrooms: 3 Number of Occ	ipants:max		
Basement Yes No			
Pump Required: ☐Yes ☒ No ☐ May be req	uired based on final location and elevation	s of facilities	
Type of Water Supply: Community Public Permit conditions:	☐ Well Distance from well 1	feet Permit va	lid for: 🔀 Five years
Australia de Cara de	84	1 - /	
Authorized State Agent:	Date:	4/30/07	SEE ATTACHED SITE SKETCH
The issuance of this permit by the Health Department in no w	ay guarantees the issuance of other permits. Th	ie permit holder is responsible for checking with	annonriate governing hading in masting
their requirements. This site is subject to revocation if the site permit is subject to compliance with the provisions of the Law	plan, plat, or the intended use changes. The li	mprovement Permit shall not be affected by a c	hange in ownership of the site. This
	Construction Author	orization	
	(Required for Building	Permit)	
The construction and installation requirements of Rules .1950, installed in accordance with the accordance	1952, .1954, .1955, .1956, .1957, .1958, and	.1959 are incorporated by references into this m	permit and shall be met Sustame shall be
instance in accordance with the attached system layout.			crime and shall be thet. Systems shall be
ISSUED TO: TENIS HEAR HOME	⋝ PROPERTY LOG	CATION: OLO US421	
~	CHRINICION	MAMIE BELL RIDE	6 IAT # 000
Facility Type: SFO (51×60°)			<u>€</u> LOT # <u>88</u>
	> nen Enpailstoll	☐ Repair	
	tures? 🗆 Yes 🔑 No	_	
Type of Wastewater System** Convension	<u> マルレ (Initial)</u> Wa	istewater Flow: 340 GPD	
(See note below, if applicable 🗆)			
CONVENT	ON AL (RE	epair)	
Installation Requirements/Conditions	,	• ,	
•	3 TOENCHE	5	
Septic Tank Size <u>1000</u> gallons	Exact length of each trench	feet Trench Spacing:	9
Pump Tank Size gallons	Transfer shall be said their the	rench spacing:	Feet on Center
dub rank size ganons	Trenches shall be installed on contou		
	Maximum Trench Depth of: 24	inches (Maximum soil cov	er shall not exceed
	(Trench bottoms shall be level to +.	/-1/4" 36" above the tre	ench bottom)
	in all directions)		,
Pump Requirements:ft. TDH vs	GPM ´		G inches below size
		Americans A. Dorek	inches below bibe
anditions		Aggregate Depth:	inches above pipe
Conditions:			inches below pipe inches above pipe inches total
*If applicable: I understand the system ty	pe specified is different from the type	specified on the application. I accept th	he specifications of this permit.
Owner/Legal Representative Signature: his Construction Authorization is subject to revocation of the site. If the site This Construction Authorization is subject to revocation of the site.		Date:	
nis Construction Authorization is subject to revocation of the site	plan, plat, or the intended use changes. The 6	Construction Authorization shall not be transferre	d when there is a change in ownership
f the site. This Construction Authorization is subject to complian	ce with the provisions of the Laws and Rules fo	or Sewage Treatment and Disposal and to the co	onditions of this permit.
			CET ATTACHED CITE CHETCH
uthorized State Agent:	13/25	Date: 4/3007	
	Construction Authorization	Date: 4/3/07 on Expiration Date: 4/30/12	
	CONDUCTION WITHOUTZATIO	ni exhitation nate; <u>1/20/32</u>	

HTE# 07-5-17352	HTE#	07	-5-	M3	53
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Permit # 23884

Harnett County Department of Public Health Site Sketch

ISSUED TO: TRAVE Authorized State Agent:	PROPERTY LOCATON: OLD US 42) WESLO HOMES SUBDIVISION MAMIE BELL RIDGE LOT # 88 ES (OLIVER TOLYSOUTS) Date: 4 30/07
	21'X70' CONVENTIONAL REFAIR AREA 237'
	51' × 60' + 23' → 23' → 25' →