

HTE# 07-5-17432R

Harnett County Department of Public Health

Improvement Permit

26601

A building permit cannot be issued with only an Improvement Permit

ISSUED TO: D Walsh Construction PROPERTY LOCATION: Tingen Rd.
 NEW REPAIR EXPANSION SUBDIVISION: Patterson Point LOT # 84
 Type of Structure: SFD 44x24' Site Improvements required prior to Construction Authorization Issuance: _____
 Proposed Wastewater System Type: Pump to Conventional
 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
 Permit conditions: _____ No expiration

Authorized State Agent: Bryan McSwain, REHS Date: 5/9/2011 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: D Walsh Construction PROPERTY LOCATION: Tingen Rd.
 SUBDIVISION: Patterson Point LOT # 84

Facility Type: SFD New Expansion Repair
 Basement? Yes No Basement Fixtures? Yes No
 Type of Wastewater System** Pump to Conventional (Initial) Wastewater Flow: 360 GPD
 (See note below, if applicable)
25% Reduction System
Pump to Conventional (Repair)

Installation Requirements/Conditions

Septic Tank Size <u>1000</u> gallons	Number of trenches <u>3</u>	Exact length of each trench <u>100</u> feet	Trench Spacing: <u>9</u> Feet on Center
Pump Tank Size <u>1000</u> gallons	Trenches shall be installed on contour at a	Maximum Trench Depth of: <u>18-20</u> inches	Soil Cover: <u>6-12</u> inches
	(Trench bottoms shall be level to +1-1/4" in all directions)	(Maximum soil cover shall not exceed 36" above the trench bottom)	
Pump Requirements: _____ ft. TDH vs. _____ GPM		Aggregate Depth: <u>6</u> inches below pipe	<u>2</u> inches above pipe
Conditions: _____		<u>12</u> 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 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. SEE ATTACHED SITE SKETCH

Authorized State Agent: Bryan McSwain, REHS Date: 5/9/2011
 Construction Authorization Expiration Date: 5/9/2016

HTE# 07-5-17432R

Permit # 26601

Harnett County Department of Public Health Site Sketch

ISSUED TO: D Walsh Construction PROPERTY LOCATOR: Finger Rd
SUBDIVISION: Patterson Pt LOT # 84

Authorized State Agent: Bryan McLean, R.E.H.S. Date: 5/9/2011

