HTE# 07-5-17516

Harriett County Department of Public mealth 23798

Improvement Permit

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: SR 1447 PAWIS CIUB PLD

SUBDIVISION MAGNOTEN CROST LOT # 26

Site Improvements required prior to Construction Authorization Issuance: ISSUED TO: DAI/ BUILDENS INC SFD Type of Structure: Proposed Wastewater System Type: 75% REDUCTION Projected Daily Flow: 360 GPD Number of Occupants: max Number of bedrooms: Basement Yes May be required based on final location and elevations of facilities Pump Required: TYes Type of Water Supply:

Community Public Well Distance from well feet Permit valid for: □ No expiration Permit conditions: 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. PROPERTY LOCATION: SR 1447 Pawls CIUB 2D
SUBDIVISION MAGNOTTA CROST LOT # 26 ISSUED TO: DAIL BUILDERS INC New Expansion Repair Basement Fixtures?

Yes ☑ No Wastewater Flow: 360 GPD 259/07/EDUCTFOW (Initial) Type of Wastewater System** (See note below, if applicable) 2590NEDUCTION SIFTISM (Repair) Installation Requirements/Conditions Exact length of each trench ______ feet Septic Tank Size 1000 gallons Pump Tank Size ____ Trenches shall be installed on contour at a Maximum Trench Depth of: 28->18 inches (Maximum soil cover shall not exceed (Trench bottoms shall be level to +/-1/4" 36" above the trench bottom) in all directions) Aggregate Depth: ______ inches below pipe inches above pipe _____ inches total Pump Requirements: ft. TDH vs. I understand the system type specified is different from the type specified on the application. I accept the specifications of this permit. ** If applicable: Owner/Legal Representative Signature: 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: Construction Authorization Expiration Date: 5-18-12

Harnett County Department of Public Health Site Sketch

| | PROPERTY LOCATON: 5/2/447 Rawls Club RD | |
|---|---|----------|
| ISSUED TO: DAIL Buildens INC | | LOT # 26 |
| Authorized State Agent: James & Manhand | Date: 5-18-07 | |

