HTE# 07-500-17592RR Harnett County Department of Public Health

25504

Improvement Permit

A building pe	rmit cannot be issued with only an Improvement Permit	
ISSUED TO: Shua me All	PROPERTY LOCATION: 572 1 0 G	
	SUBDIVISION CYPTENS Woods	LOT #/_
,	Site Improvements required prior to Construction Auth	norization Issuance:
	<u>(C</u>	
Proposed Wastewater System Type: Purp 7- u/fra sha Projected Daily Flow: 340 GPD	100	
Number of bedrooms: Number of Occupants:(max	
Basement Yes No		
Pump Required: Yes No May be required based o	n final location and elevations of facilities	
Type of Water Supply: Community Public Well	Distance from well 100 feet Permit valid for:	Five years
Permit conditions: Mect on s. to For Fin	1 LAYON - STUB ON Plunbing	☐ No expiration
	Thister Where shown & if D" A	At Other Dr
CAN be maintagned purp may a		2" 1 Approved con
Authorized State Agent::	Date: 5-19-09 SEE AT	TTACHED SITE SKETCH
site is subject to revocation if the site plan plat or the intended we choose The level	e of other permits. The permit holder is responsible for checking with appropriate appropriate	to the second second
the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permi	TOYETHERE PERMIT SHALL BOT DE ATTECTED DY A CHANGE IN OWNERS IN of the cita. This normit is an Line to	to compliance with the provisions of
C	another Authority	
<u>u</u>	onstruction Authorization	
71	(Required for Building Permit)	
The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .199 with the attached system layout.	6, .1957, .1958. and .1959 are incorporated by references into this permit and shall be met. System	ns shall be installed in accordance
ISSUED TO: Suhna M= Anly	DECEMBER LOCATION CO. 13 - /	
1330ED 10. STAGA 111 HATY	PROPERTY LOCATION: ST 1106	
English Turn SED-12214 DOS	SUBDIVISION Cypress woods	LOT # <u>4</u>
Facility Type: SED- 68x68-3BC		
Basement? Yes No Basement Fixtures?		
Type of Wastewater System** Kup to who	Challow (Initial) Wastewater Flow:	36 J GPD
(See note below, if applicable)		
Dr.p Irrigat	(Repair)	
Installation Requirements/Conditions Number o		
C : T : C:	th of each trench 60 feet Trench Spacing:	F C
	hali be installed on contour at a Soil Cover: Record 6 to	Feet on Center
	Trench Depth of: 2 inches (Maximum soil cover shall	9
	ttoms shall be level to +/-1/4" 36" above the trench bot	tom) Za
in all dire	tions)	
Pump Requirements:ft. TDH vs GPM	(2	inches below nine
	Aggregate Depth:	inches below pipe inches above pipe
Conditions:	90 - 9	12 inches total
		inches total
*If applicable: / understand the system type specified is different	from the type specified on the application. I accept the specifications of t	
- The system type specifica is unicient	Tom the type specified on the application. I accept the specifications of t	this permit.
Owner/Legal Representative Signature:		
his Construction Authorization is subject to revocation if the given law also also	Date:ed use changes. The Construction Authorization shall not be transferred when there is a change in o	
onstruction Authorization is subject to compliance with the provisions of the latest		
onstruction Authorization is subject to compliance with the provisions of the Laws and Ri	es for sewage freatment and Disposal and to the conditions of this permit.	ATTACHED SITE SKETCH
10/01		
uthorized State Agent:	Date: OS-19-09	
	Construction Authorization Expiration Date: 10518-201	3

HTE# 07-500-17592PR

Permit # 25504

Harnett County Department of Public Health Site Sketch

