HTE# 07-5-17626

Har.... County Department of Public ...alth 23959

Improvement Permit

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: 5R/429 Chalubeate RD SUBDIVISION DEXTERPERS LOT # 58 EXPANSION Site Improvements required prior to Construction Authorization Issuance: Type of Structure: Proposed Wastewater System Type: 25% REDIKTICK System Projected Daily Flow: 360 GPD Number of bedrooms: 3 Number of Occupants: 6 max Basement Yes No ☐ No ☐ May be required based on final location and elevations of facilities Pump Required: Yes Type of Water Supply:

Community Public Well Distance from well feet Five years Permit valid for: ■ No expiration Permit conditions: The issuance of this permit to 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 1429 Chalphoato ND
SUBDIVISION DENTRA FERS LOT # 58 ISSUED TO: BELTWELL HOMES INC New Expansion Repair Facility Type: SFD Basement Fixtures? Yes No Basement? Yes Type of Wastewater System** 25%76000000005845 (Initial) Wastewater Flow: 360 (See note below, if applicable

) Installation Requirements/Conditions Exact length of each trench 80 feet Trench Spacing: 9 Feet on Center Septic Tank Size 1000 gallons Pump Tank Size 1000 gallons Maximum Trench Depth of: 18" mar inches (Maximum soil cover shall not exceed (Trench bottoms shall be level to +/-1/4" 36" above the trench bottom) in all directions) Pump Requirements: ft. TDH vs. Aggregate Depth: ______ inches above pipe Conditions: **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: 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. Authorized State Agent: James E Market Date: 6-8-07

Construction Authorization Expiration Date: 6-8-18

Harnett County Department of Public Health Site Sketch

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ISSUED TO: Britwell Homes		LOT #
Authorized State Agent	5 Markon tons Date: 6-8	7-07
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A state of the sta	PART 25% 15' REDUCTION 15' REPAIR 1 30' GOO 47' G SFD 41 GOO REPAIR AINTS COURT	# pump to Manither SystBan 3-1/2"sch 40 Taps