HTE# 07-5-178122

## Harnett County Department of Public Health

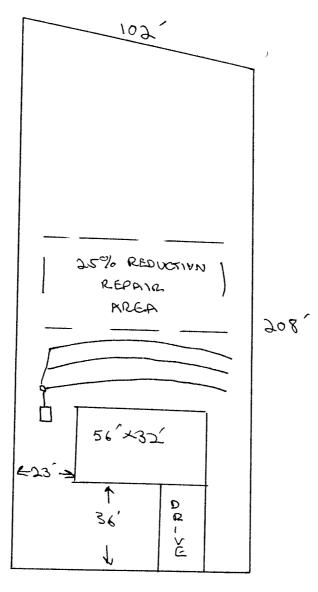
Improvement Permit

26233

		A building pe	rmit cannot be issued w			
ISSUED TO: REGEN	Ca Home	101	PROPERTY LOC	ATION: HOOVER		50
NEW X REPAIR	<u> </u>	NCIUN 🗆	ZORDIAIZION	PERSIMMON		LOT # <u>38</u>
NEW REPAIR Type of Structure: SED	(56 232)"	moton 🗀		one improvements r	equired prior to Construction Auth	orization Issuance:
Proposed Wastewater System T	VDE: 2570 RE	DUCTION 5				
Projected Daily Flow: 34	GPD GPD		<u> 70</u>			
Number of bedrooms: 3	Number of (	Occupants:	S max			
Basement  Yes No		recopulities	IIIAX			
` •	KNo □ May be	required based o	n final location and elev	vations of facilities		
Type of Water Supply:   Co		ic 🗆 Well	Distance from well	feet	Permit valid for:	Five years
Permit conditions:			-		t crime tand tot.	No expiration
	11					- no expiration
Authorized State Agent::	· D WA	13 SE		2/11/10	SEE AT	TACHED SITE SKETCH
The issuance of this permit by the Hea	Ith Department in no way g	juarantees the issuan	ce of other permits. The perm	it holder is responsible for cl	necking with appropriate governing bodies	in meeting their requirements. This
the Laws and Rules for Sewage Treatme	plan, plat, or the intended ent and Disposal and to cor	use changes. The Impulsions of this parmi	provement Permit shall not be	affected by a change in owi	nership of the site. This permit is subject t	o compliance with the provisions of
	and pisposal and to con	attivits of this perint	L.			
				.1 • .•		
		<u>U</u>	onstruction Au	<u>ithorization</u>		
			(Required for Build	ding Permit)		
The construction and installation require	ements of Rules .1950, .195	2, .1954, .1955, .19	56, .1957, .1958. and .1959 a	are incorporated by reference	into this permit and shall be met. System	ns shall be installed in accordance
with the attached system layout.						
ISSUED TO REGENC	+ Homes	NG	DDADEDT	V LOCATION: 12	OVER RD	
	~	,	FROTENI	ou $Q_{-}$	OVAT LD	
Facility Type: SFD(5	€×39€)	<b>\</b>	70 2014171	ON TESSIM	JON HILL	LOT # <u>3-8</u>
				sion 🗆 Repair		
Basement?  Yes		Fixtures?	Yes 🔀 No			24
Type of Wastewater System**	- <u>920 V</u>	EDUCTION	DYSTEM		(Initial) Wastewater Flow:	SCO GPD
(See note below, if applicable	: ∐)		6			
	72% KG	かしてくいっと	System	(Repair)		
<u> Installation_Requirements/Con</u>		Number o	of trenches <u>3</u>			
Septic Tank Size 1000	gallons	Exact len	gth of each trench _	75 feet	Trench Spacing:	Feet on Center
Pump Tank Size	gallons	Trenches	shall be installed on c	ontour at a	Soil Cover:	inches
•	<b>v</b>	Maximum	Trench Depth of:	inches	(Maximum soil cover shall	
			ottoms shall be level t		•	
		in all dire		10 17-174	36" above the trench bot	ttom)
Pump Requirements	fr TDU		ctions)			
Pump Requirements:	IL. IDH VS	GPM				inches below pipe
S P.C					Aggregate Depth:	inches above pipe
Conditions:						inches total
VATER LINES (INCLUDING	<b>IRRIGATION) MUS</b>	T BE 10FT. FR	OM ANY PART OF S	EPTIC SYSTEM OR I	REPAIR AREA.	
IO UTILITIES ALLOWED IN	INITIAL OR REPAIR	R DRAIN FIELD	) ARFA			
<u> "If applicable: / understand the applicable</u>	ie system type specii	fied is different	from the type specific	ed on the application.	I accept the specifications of	this permit.
wner/Legal Representative Sig	gnature:	<u></u>			Date:	
nis Construction Authorization is subject	to revocation if the site pla	in, plat, or the inten	ded use changes. The Construc	tion Authorization shall not I	oe transferred when there is a change in o	wnership of the site. This
onstruction Authorization is subject	ompliance with the provision	Dor the Laws and R	ules for Sewage Treatment and	d Disposal and to the conditi	ons of this permit. SEE	ATTACHED SITE SKETCH
	TI IN	INV				
uthorized State Agent:	Me to	11 MIL 14	RENS	Nate:	8/11/0	three
•		1	Construction Authori	ization Evaluation N	200	
			CONQUEUCTION MUTHOLI	LAUVII EXPITATION D	ale011115	ı

## Harnett County Department of Public Health Site Sketch

PROPERTY LOCATON: HOOVER RD	
ISSUED TO: REGENCY HOMES INC SUBDIVISION PERSIMMON HILL	LOT # 38
Authorized State Agent: Date: 8 11 10	



OLD FIELD LOOP

Department of Environment, Health and Natural Resources Division of Environmental Health On-Site Wastewater Section

Sheet:
Property ID:
Lot #:
File #:
Code:

## SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

Owner:	Applicant:					
Address:			valuated:			
Proposed Facility	: 360 269	Design	Flow (.1949); 3	BEDGOOM	Property Size:	
Location of Site:	<u> </u>	Proper	ty Recorded:		• •	
Water Supply:		Public	Individual	☐ Well	☐ Spring	☐ Other
Evaluation Metho	xd: 🔯	Auger Boris	ng 🗌 Pit		Cut :	
Type of Wastewa	ter:	Sewage	Industrial Pr	rocess 🔲	Mixed	

P R O F I .1940				ORPHOLOGY .1941	OTHER PROFILE FACTORS				
L B #	Landscape Position/ Slope %	Horizon Depth (In.)	.1941 Structure/ Texture	.1941 Consistence Mineralogy	.1942 Soil Wetness/ Color	.1943 Soil Dipth (IN.)	.1956 Sapro Ciaso	.1944 Restr Horiz	Profile Class & LTAR
1	5-10%	0-16,	GLIS	VFOLUSIMP					
		1636'	50K SKL	D 35/58	104enhe24"				15 4
		* 6				arko kwy.	(18.00) (4.00)		
2		0.9D	C 15/3	JFR NS/ND					
		92-117,	58K 54L	JFR. NS/ND Fe 55/52		£			P545
					The state of the s	·			
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		18.00							
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Description	Initial System	Repair System	Other Factors (.1946); Site Classification (.1948);
Available Space (.1945)	A	<b>≯</b> √	
Systems Type(s)	32010 SCD	259,860	Evaluated Bytor
Site LTAR	.14	Ä	Others Present: