HTE# 07-5-17927

Harriett County Department of Public multh 24086

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

13	PROPERTY LOCA	ATION:	
ISSUED TO: MIKE WATERS HO	OMES INC SUBDIVISION	ROSEMONT	LOT # _1
NEW REPAIR Type of Structure: SFO (50'×40')	PANSION	Site Improvements required prior to Construction Au	thorization Issuance:
Proposed Wastewater System Type: Compen	SANOITE		
Projected Daily Flow: 480 GPD			
Number of bedrooms: Number of	f Occupants: 8 max		
Basement 🗆 Yes 🔀 No			
Pump Required: □Yes 📈 No □ May b	e required based on final location and eleva-	ations of facilities	.
Type of Water Supply: Community Pu	blic	100 feet Permit valid for	
Permit conditions:			☐ No expiration
A			
Alle as			
		51.1	
Authorized State Agent::	RS Date:		ATTACHED SITE SKETCH
The issuance of this permit by the Health Department in	no way guarantees the issuance of other permi	its. The permit holder is responsible for checking with appro	priate governing bodies in meeting
their requirements. This site is subject to revocation if the	ne 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	ie Laws and Rules for Sewage Treatment and Dis	sposal and to conditions of this permit.	
	Construction Au	uthorization	
	(Required for Build		
The construction and installation consistences of Rules		3. and .1959 are incorporated by references into this permit	and shall he met Systems shall he
installed in accordance with the attached system layout.	1750, 1752, 1754, 1755, 1756, 1757, 1756	. and .1737 are incorporated by references into this permit	and shall be men systems shall be
ISSUED TO: MIKE WATERS HO	MES INC. PROPERT	TY LOCATION:	
BOLD TO. TITLE THE BLD TIC	SUBDIVIS		LOT # 1
Facility Type: SFD (50×40)	\ .		
	New 🗆 Expar	nsion Repair	
, ,	ent Fixtures? 🗆 Yes 💢 No	1000	
Type of Wastewater System**ONVE	MIONAL (Initial)	Wastewater Flow: 480 GPD	
(See note below, if applicable \square)			
COM	VENTIONAL	(Repair)	
Installation Requirements/Conditions			
•	570	RENCHES	
Septic Tank Size gallons	Exact length of each trench _	45 feet Trench Spacing: 9	Feet on Center
Pump Tank Size gallons	Trenches shall be installed on		inches
Tulip Talk Size gallons	Maximum Trench Depth of:		
	(Trench bottoms shall be level	to $\pm 1/4$ " 36" above the trench	Dottoin)
	in all directions)		C
Pump Requirements:ft. TDH vs.	GPM		inches below pipe inches above pipe
		Aggregate Depth:	inches above pipe
Conditions:			inches total
		Á.	
**If applicable: I understand the sys	stem type specified is different from the	e type specified on the application. I accept the s	specifications of this permit.
ii applicable.	tem type specified is different from the	, type specified on the appreciation. I accept the s	pecincations of time period
0		Date	
Owner/Legal Representative Signature:			
This Construction Authorization is subject to revocation	the site plan, plat, or the intended use chang	ges. The Construction Authorization shall not be transferred w	men there is a change in ownership
of the site. This Construction methorization is subject to	composesse with the provisions of the Laws and	d Rules for Sewage Treatment and Disposal and to the condi	E ATTACHED SITE SKETCH
	S. Mille		E WILWCHEN SHE SKEICH
Authorized State Agent:	1/110 /82	orization Expiration Date: 8112	
	Construction Author	orization Expiration Date: 8 112	

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HTE#	0,1	-7-	11	47	
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Permit # 24086

Harnett County Department of Public Health Site Sketch

