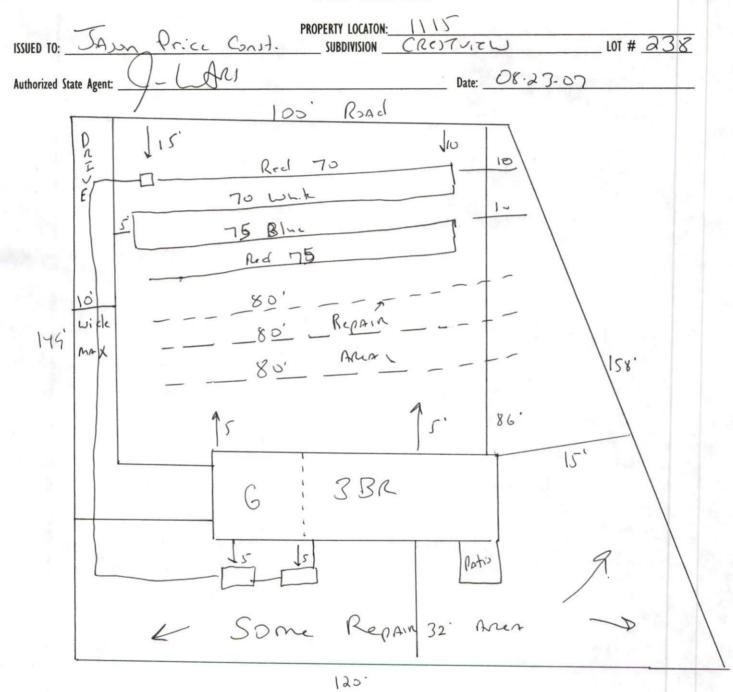
## HTE# 07-5001 8088 R Harn County Department of Public Incalth 24277

**Improvement Permit** 

PROPERTY LOCATION: 1 \ \ \	
ISSUED TO: JASON Prize Const. SUBDIVISION CRESTUTUS LOT#6	238
Type of Structure: SFO-60x43 3BR	
Proposed Wastewater System Type: Purm To 25% (led. 54)tm	
Projected Daily Flow: 360 GPD	
Number of bedrooms: Number of Occupants: max	
Basement  \( \sumsymbol{Yes} \) No	
Pump Required: Ares \( \sum \) No \( \sum \) May be required based on final location and elevations of facilities	
Type of Water Supply:  Community Public Well Distance from well So feet Permit valid for: Five years  Permit conditions: Mech Onlike for Five Layort Maintain All School Distance from well So feet Permit valid for: Five years	on
Type of Water Supply: Community & Public Well Distance from well 50 feet Permit valid for: & Five years  Permit conditions: Meet Onste for Final Layort Maintain All Sct Backs In No expiration  DO NOT DRIVE DR PARK ON SEPTICE. System	<b>,</b>
10 1101 MEIN 03- 1- 10 10 10 10 10 10 10 10 10 10 10 10 10	
Authorized State Agent: Date: 0827-07 SEE ATTACHED SITE SKETCH	
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	
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. T	his
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	
Construction Authorization	
(Required for Building Permit)	
The construction and installation requirements of Rules .1950, .1954, .1955, .1956, .1957, .1958. and .1959 are incorporated by references into this permit and shall be met. Systems installed in accordance with the attached system layout.	snall be
ISSUED TO: JANA Price Gast- PROPERTY LOCATION: 1115	
SUBDIVISION CRESTUICE LOT # 5	238
Facility Type: SFO - GO x 43 3BR   New   Expansion   Repair	
Basement? Yes No Basement Fixtures? Yes No	
Basement? Yes No Basement Fixtures? Yes No  Type of Wastewater System**    Yes   No   No   Basement Fixtures?   Yes   No    Type of Wastewater System**   Yes   No   No   No   No   No   No   No   N	
(See note below, if applicable 2) 225 LF . F	
25% Red-ction System (Repair)	
Installation Requirements/Conditions	
Q.	
Septic Tank Size 1000 gallons Exact length of each trench 1 x 225 feet Trench Spacing: Feet on Center	
Pump Tank Size 1000 gallons Trenches shall be installed on contour at a Soil Cover: inches	
Maximum Trench Depth of: 18-27 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 GPMinches below	
Aggregate Depth: inches abo	
Conditions: inch	nes total
**If applicable: I understand the system type specified is different from the type specified on the application. I accept the specifications of this pe	ermit.
Owner/Legal Representative Signature: Date:	
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 o	wnership
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.	CII
SEE ATTACHED SITE SKET	LH
Authorized State Agent: Date: 08-23-07	
Construction Authorization Expiration Date: $28.27-29$	

## Harnett County Department of Public Health Site Sketch



Meet onsite for Final Lagort
Maintain All Set Barks
Initall 1x225 of 25%. Reduction System At 18 to 24"
Do not Drive or park on septic System