HTE# 07-5-18249R

Harnett County Department of Public nealth 24135

Improvement Permit

A	building permit cannot be issued with only PROPERTY LOCATION:	an Improvement	Permits 1 kg Rol	
ISSUED TOY Harold Cale Barne	FROPERIT LOCATION:	oe's hak	e	LOT #
NEW REPAIR . EXPANSIO	Site I		uired prior to Construction Authori	zation Issuance:
Type of Structure: SFD 69 X 50				
Proposed Wastewater System Type: Accepted 5	x5tem			
Projected Daily Flow: GPD				
Number of bedrooms: 3 Number of Occup	ants:max		(V)	
Basement 🖂 Yes 🗆 No				
	red based on final location and elevations o			
Type of Water Supply: Community Public Permit conditions:	☐ Well Distance from well	feet	Permit valid for:	☐ Five years ☐ No expiration
	,			
Authorized State Agent: L Suyan Mus	in, R.S. Date: 19	0/18/200	SEE ATT	ACHED SITE SKETCH
The issuance of this permit by the Health Department in no wa				
their requirements. This site is subject to revocation if the site				
permit is subject to compliance with the provisions of the Laws				
	Construction Author	rization		
	(Required for Building Pe			
The construction and installation requirements of Rules .1950, .1	, ,	The same of the sa	d by references into this permit and	shall be met. Systems shall be
installed in accordance with the attached system layout				
ISSUED TO: Harold Cale Barn	PROPERTY LOCA	TION: 5R/	566	
ISSUED TO: Harold Cale Born	SUBDIVISION _	ope's Lake	د	LOT # <u></u>
Facility Type: SFD 69 X50	New □ Expansion			
Basement? Yes No Basement Fix	tures? Yes No			
Type of Wastewater System** Accepted	System (Initial) Wast	tewater Flow:	760 GPD	
(See note below if applicable [])	,			
Pump to	Accepted System (Rep	pair)		
Installation Requirements/Conditions				
•				
Septic Tank Size gallons	Exact length of each trench 3 x 6	o feet	Trench Spacing: 9	Feet on Center
Pump Tank Size gallons	Trenches shall be installed on contour	r at a	Soil Cover:	inches
	Maximum Trench Depth of:			
	(Trench bottoms shall be level to +/-		36" above the trench bot	
	in all directions)			,
Pump Requirements: ft TDH vs	GPM			inches helow nine
romp requirements.	_ 3711		Aggregate Denth:	inches above nine
Conditions: Rundra L'age on	contour I NO DEEPE.	R than	12 inches	inches total
Ticker will seed to al	fenier 1 H. well			incles total
Pump Requirements:ft. TDH vs Conditions: Rundranlines an **If applicable: I understand the system to	51 151 150	······································		C
**If applicable: I understand the system ty	pe specified is different from the type s	specified on the	application. I accept the specil	ications of this permit.
Owner/Legal Representative Signature: This Construction Authorization is subject to revocation if the signature.			Date:	
This Construction Authorization is subject to revocation if the si	e plan, plat, or the intended use changes. The C	Construction Authori	zation shall not be transferred when t	there is a change in ownership
of the site. This Construction Authorization is subject to complia		(5)	/ ***	PLOUPE CHE CHETCH
11	Twin R.S.	Α	SEE AL	TACHED SITE SKETCH
Authorized State Agent:	Jum/c.).	Date:	10/18/200> Date: 10/18/2012	
	Construction Authorizatio	on Expiration D	ate: /0/18/2012	

Harnett County Department of Public Health Site Sketch

