HTE# 07-5-18352 Harnect County Department of Public nealth 24316

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

			PROPERTY LOCA				
ISSUED TO: BILL CL			_ SUBDIVISION _	CAROLINA			LOT # <u>45</u>
NEW A REPAIR Type of Structure: SFD (EXPANSIO 4	N () 6' ×52		Site Improvements	required prior to	o Construction Author	orization Issuance:
Proposed Wastewater System Typ	E CONVENTIO	NAL	_				
Projected Daily Flow:	360 GPD		_				
Number of bedrooms:	3 Number of Occup	ants: 86	_max			,	
Basement Yes No		-					
Pump Required: □Yes □	No 🔀 May be requi	red based on final le	ocation and elev	ations of facilities			
Type of Water Supply: Com	munity D Public	☐ Well Distan	ice from well $_$	feet feet		Permit valid for:	Five years
Permit conditions:							☐ No expiration
	lui						
		P.S	D .	9/7/07		CFF AT	TACHED CITE CHETCH
Authorized State Agent::	Health Department in no we	1			is responsible for s	to the same of the	TTACHED SITE SKETCH
The issuance of this permit by the I their requirements. This site is subje	realth Department III no wa	olan plat or the inten	ice of other perili ided use changes	The Improvement Perm	nit shall not he affe	ected by a change in	ownership of the site. This
permit is subject to compliance with						, and a fine of a single of	
		Constr	ustion Au	thorization			
				ithorization			
The construction and installation req	i		quired for Build		aratad bu rafaranca	e into this parmit and	d shall ha mat Sustams shall ha
installed in accordance with the atta		752, .1754, .1755, .13	730, .1737, .1730.	and 1939 are incorpo	orated by reference	is into this permit and	I shall be filet. Systems shall be
ISSUED TO: BILL C		S	PROPERT	Y LOCATION:			
	` `			ON CAROL	INA CA	KS	LOT # 45
Facility Type: SFO(6	5×40)	Now		nsion Repa			
Basement? Yes		tures? Yes		ision in the pr		360	
Type of Wastewater System**			(Initial)	Wastewater Flow		GPD	
(See note below, if applicable		71.11	(IIIILIAI)	Wastewater Tiow.		010	
(see note below, it applicable	25% RED	UCTION SY	STEM	(Repair)			
Installation Requirements/Cond	litions		4 3 70	RENCHES			
Contract Con 1000		Frank Innerh of			4 Tuanah Cas	9	Feet on Center
Septic Tank Size 1000	•	Exact length of					
Pump Tank Size	gallons	Trenches shall be		and the same and t		: 12-8	
				271-90 inch	,	ım soil cover shall	
		(Trench bottoms		to +/-1/4"	36" at	ove the trench bo	ittom)
		in all directions)				(
Pump Requirements:	ft. TDH vs	GPM					inches below pipe inches above pipe
					Aggregate	Depth:	inches above pipe
Conditions:						_	12 inches tota
**If applicable: / un	nderstand the system to	rpe specified is diff	erent from the	type specified on	the application.	I accept the spec	cifications of this permit.
in appreciate.	derstand the system ty	pe specifica is aim	orene mem me	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	т трртошнот		, , , , , , , , , , , , , , , , , , ,
Owner/Legal Representative Signature	gnature:					Date:	
This Construction Authorization is su	bject to revocation if the sit	e plan, plat, or the in	tended use change	s. The Construction Aut	thorization shall no	t be transferred when	there is a change in ownership
of the site. This Construction Author	ization is sobject recomplia	ace with the provisions	of the Laws and	Rules for Sewage Treat	tment and Disposal		
	11111	12		2	c). 1		TTACHED SITE SKETCH
Authorized State Agent:	Mr M	MATIES		Dat	te:	107	
_	\	Egnst	truction Autho	rization Expiratio	n Date:9	17/12	
PERMY F	EVISED (-ifci uc	Ilm B	7 01		. 1	

Harnett County Department of Public Health Site Sketch

