HTE# 07-5-18369

## Harnett County Department of Public Health 24323 Improvement Permit

A building permit cannot be issued with only an Improvement Permit

0. 0.	PROPERTY LOCA	ITION:		
155UED TO: RAM DEVELOPMENT INC	SUBDIVISION	CAROLING (	DAKS	LOT # 2
NEW REPAIR DEXPANSION D  Type of Structure: SED (S2x46')  Proposed Wastewater System Type: Connection as b		Site Improvements rec	quired prior to Construction Autho	orization Issuance:
Type of Structure: SFD (S2×46')				
	PA-ST-FF			
Projected Daily Flow: 360 GPD				
Number of bedrooms: 3 Number of Occupants: 6	max		4	
Basement 🗆 Yes 🔀 No				
Pump Required: □Yes ⊠No □ May be required based on	final location and eleva-	itions of facilities		
Type of Water Supply:   Community   Public   Well	Distance from well 10	OO feet	Permit valid for:	Five years
Permit conditions:				☐ No expiration
- Chillian				
		1 1		
Authorized State Agent:	Date: _	9/24/07	SEE AT	TTACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guarantee th	e issuance of other permit	ts. The permit holder is re	sponsible for checking with appropria	ite governing bodies in meeting
their requirements. This site is subject to revocation if the site plan, plat, or the	he intended use changes. I	The Improvement Permit st	hall not be affected by a change in o	ownership of the site. This
permit is subject to compliance with the provisions of the Laws and Rules for	Sewage Treatment and Disp	posal and to conditions of	this permit.	
Co	nstruction Au	thorization		
<del></del>	(Required for Build			
The construction and installation requirements of Rules .1950, .1952, .1954, .19	treduited for Duffer	ing remail	ad for automorphism (15) and (5) are	
installed in accordance with the attached system layout		and .1757 are incorporate	ed by references into this permit and	shall be met. Systems shall be
ISSUED TO: RAM DEVELOPMENT	PROPERTY	LOCATION		
	CHRINICH	M Can	- 604-	107.44.0
ISSUED TO: RAM DEVELOPMENT  Facility Type: 5FO (52×46)	)	M CREOLINI	A CHKS	LOT # <u>2</u>
Possessed T Vis. TS All D TS A	new 🗀 Expans	sion 🗀 Kepair		
Basement?  Yes No Basement Fixtures? Y				
Type of Wastewater System** Conventional	(Initial)	Wastewater Flow:	<u> 360</u> GPD	
(See note below, if applicable $\square$ )				
INNOVATIVE		_(Repair)		
Installation Requirements/Conditions				
	1 TREA	KM		
Septic Tank Size <u>1000</u> gallons Exact leng	th of each trench	200 feet	Trench Spacing: 9	Feet on Center
	hall be installed on co			inches
•	Trench Depth of: \\S	_	(Maximum soil cover shall	
	•		1	
	ttoms shall be level to	0 +/-1/4	36" above the trench bot	itom)
in all direc	ctions)		(	
Pump Requirements:ft. TDH vs GPM			<u> </u>	inches below pipe
	1		Aggregate Depth: 2	inches above pipe
Conditions: SEE DRAWING FOR UTILITY L	-OCATION:		Aggregate Depth: 2	a inches total
*If applicable: I understand the system type specified i	is different from the i	vne specified on the	annlication I account the enecia	fications of this normit
	s amerene nom the t	pe specifica on the	аррисации. Тассере иле зреси	ications of this perint.
Jwner/Legal Representative Signature:			<b>D</b> -4	
Owner/Legal Representative Signature:  This Construction Authorization is subject to revocation if the site plan, plat, or	4	TI C	Date:	
the cite. This Construction Authorization is emblace to revocation it the site plan, plat, or	the intended use changes.	The Construction Authoriza	ation shall not be transferred when t	here is a change in ownership
of the site. This Construction Authorization is arbiect to compliance with the pro	MINISTER CAMP OF THE FEMALES AND K	uies for sewage freatment		
With a single Charles Assert Williams	a <	_		TACHED SITE SKETCH
Authorized State Agent:	QLS.		9 2507	
i	Construction Authori	zation Expiration Da	ate: 9/26/12	

HTE# 07-5-18369	
-----------------	--

Permit # <u>24323</u>

## Harnett County Department of Public Health Site Sketch

		PROPERTY LOCATON:			
ISSUED TO:	RAM DEVELOPMENT	SUBDIVISION CAROLINA	DAKS	LOT #	2
Authorized St	ate Agent:	RS (OLIVER TOLKSOORS) Date:	9/25/07		
			1 12		

