HTE#07-5-18462

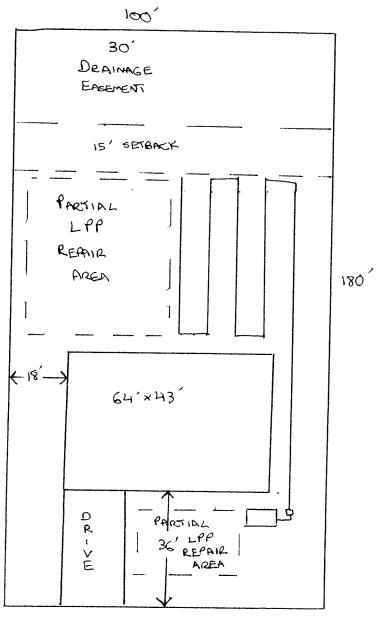
## Harnett County Department of Public Health 24502

Improvement Permit

Marie to D. No. 51 - 51 - 51	PROPERTY LOCA	_		
ISSUED TO: RAM DEVELOPMENT  NEW X REPAIR   EXPANSION	SUBDIVISION _			LOT # <u>5</u>
NEW A REPAIR EXPANSION II  Type of Structure: ラテロ (641~431)		Site Improvements req	quired prior to Construction Author	rization Issuance:
Proposed Wastewater System Type: 25% REDUCTION SYSTEM	~			
Projected Daily Flow: 480 GPD				
Number of bedrooms: 4 Number of Occupants: 8	max		,	
Basement Yes No				
Pump Required:   Yes   No   May be required based on final	location and eleva	ations of facilities		
Type of Water Supply:  Community Public Well Distaired Conditions:	ance from well	feet	Permit valid for:	Five years  No expiration
and the same of th		.1 .1		
Authorized State Agent:  The issuance of this permit by the Health Department in no way guarantees the issue their requirements. This cite is subject to reproceeding if the site place and the interpretation of the site place and the site place and the interpretation of the site place and the site place and the interpretation of the site place and the interpretation of the site place and th	Date: _	11/19/07	SEE ATT	ACHED SITE SKETCH
their requirements. This site is subject to revocation if the site plan plat or the inter-	ance of other permit	ts. The permit holder is res	ponsible for checking with appropriate	e governing bodies in meeting
their requirements. This site is subject to revocation if the site plan, plat, or the inte permit is subject to compliance with the provisions of the Laws and Rules for Sewage	ended use changes. I e Treatment and Disp	ne improvement Permit sh posal and to conditions of	all not be affected by a change in ov this permit.	unership of the site. This
Const	ruction Au	thorization		
The construction and installation requirements of Rules 1950, 1952, 1954, 1955, 1	<u>equired for Buildi</u> 1956, 1957, 1958.	and .1959 are incorporated	d by references into this permit and	shall he most Sustanus shall be
			7 by references into this permit and s	man be met. Systems shan be
ISSUED TO: RAM DEVELOPMENT		LOCATION:		
Facility Type: SED (64'×43') New	SUBDIVISIO	IN CAROLINA	L OAKS	LOT # <u>5</u>
Parament V. New	Expans	ion 🗌 Repair		
Basement? ☐ Yes ☑ No Basement Fixtures? ☐ Yes Type of Wastewater System** 25% REDUCTION SYS	,K∟ No	11	(CY)	
(See note below, if applicable $\square$ )	_(Initial)	Wastewater Flow:	GPD GPD	
LPP		/n		
Installation Requirements/Conditions		_(Repair)		
	1-025	~~1.4		
Septic Tank Size 1000 gallons Exact length of			Trench Spacing:	Face on Contra
, <u>, , , , , , , , , , , , , , , , , , </u>	e installed on co			Feet on Center
		-24 inches	(Maximum soil cover shall n	nches
	shall be level to		36" above the trench botto	
in all directions)			30 above the trench botte	<i>/</i> 111 <i>)</i>
Pump Requirements:ft. TDH vs GPM				inches below pipe
			Aggregate Depth:	inches above pipe
onditions:			00 0 7	inches total
				mency total
*If applicable: I understand the system type specified is diffe	erent from the ty	vpe specified on the a	pplication. I accept the specific	rations of this permit.
wner/Legal Representative Signature:	****		Date:	
his Construction Authorization is subject to revocation if the site plan, plat, or the interference of the site This Construction Authorization is reliable.	ended use changes.	The Construction Authorizat	tion shall not be transferred. Let	
the site. This Construction Authorization is straiget to compliance with the provisions	of the Laws and Ru	iles for Sewage Treatment a	and Disposal and to the conditions of	this permit.
uthorized State Agent:	05	<b>r</b>	SEE ATTA	ICHED SITE SKETCH
	<u>es</u>	Date:	11/19/07	
Constr	ruction Authoriz	ation Expiration Dat	e: 11/19/12	

## Harnett County Department of Public Health Site Sketch

	0	0	PROPERTY LOCATON:		
ISSUED TO:	KAM	DENETOGUENI	SUBDIVISION CAROLINA	a ()Axs	LOT # 5
Authorized Stat	to Ament		(OLIVER TOLKSDARE)	n. ulalar	
Authorized Stat	ie Agent	in institute	DONAL TOCKSDAG	Date: 11 19 07	



CAROLINA DAKS CIRCLE