HTE#07-503-18602

Harnest County Department of Public nealth 23586

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

PROPERTY LOCATION: N 27

SUBDIVISION TIME CONTROL EXPANSION Site Improvements required prior to Construction Authorization Issuance: Proposed Wastewater System Type: 25% Reduction System Projected Daily Flow: 360 GPD Number of Occupants: _____ max Number of bedrooms: Basement Yes ☐ May be required based on final location and elevations of facilities Pump Required: Tes Yes No Type of Water Supply: Community & Public Well Distance from well 50 feet Permit valid for: Five years

Permit conditions: Meet Onlife or Final Layort Maintain All Jet Backs No expiration

STUB Out Plumbing Shallow, At Ground level or higher where shown Date: 12-25-07 Authorized State Agent:: 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 meeting 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. This 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 (Required for Building Permit) The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .1957, .1958. and .1959 are incorporated by references into this permit and shall be met. Systems shall be installed in accordance with the attached system layout. PROPERTY LOCATION: NC27

SUBDIVISION TIWSEN Pointe LOT # ______

Expansion
Repair ISSUED TO: WYNA CONIT. Facility Type: STD-49x35-3BA Basement? ☐ Yes ☑ No Basement Fixtures? ☐ Yes ☑ No Wastewater Flow: 36> GPD Type of Wastewater System** 25% Reduction System (Initial) (See note below, if applicable (2) Installation Requirements/Conditions Exact length of each trench 1 300 feet Trench Spacing: 9 Feet on Center Septic Tank Size 1000 gallons Trenches shall be installed on contour at a Pump Tank Size _____ gallons Maximum Trench Depth of: ______ 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. inches below pipe Aggregate Depth: inches above pipe inches total Conditions: I understand the system type specified is different from the type specified on the application. I accept the specifications of this permit. ** If applicable: Owner/Legal Representative Signature: _ 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 ownership 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. Authorized State Agent: Construction Authorization Expiration Date: 12.00.2012

Harnett County Department of Public Health Site Sketch

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ISSUED TO: Wynn	Q. 1 AQ1	DIVISION/INSCI		
Authorized State Agent:	0.1			
Authorized State Agent:	Some L Rypi 12 75.	10 a.a. 45 71- 75'	Date: 12.20	Meet onsite for Final Layort Maintain All Sct Backs STUB ort Plumbing Thallow At ground level or higher Where Shown Zastall 1×30 125%. Reduction System
			26	1 171 10