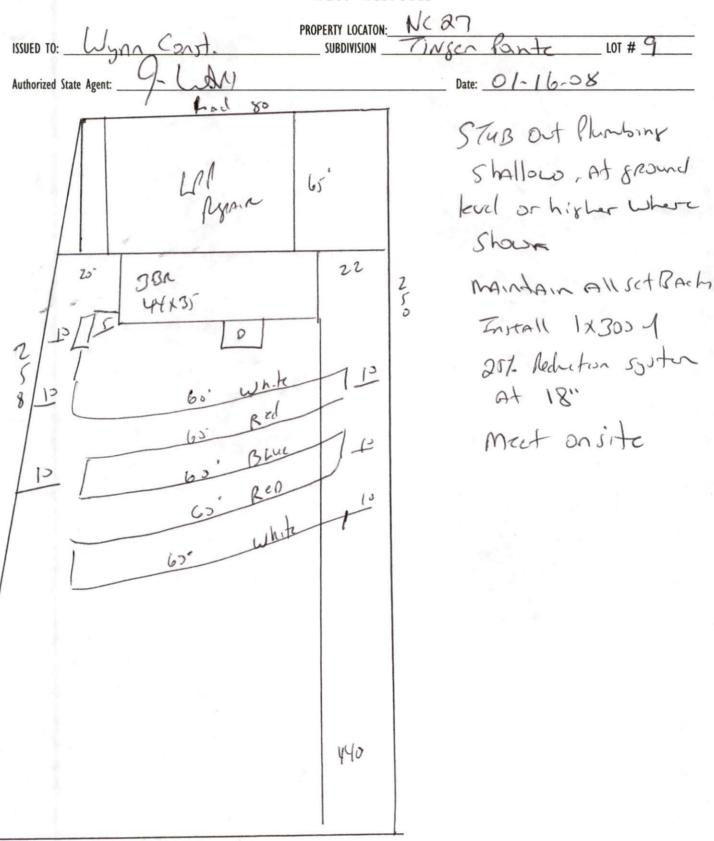
## HTE# 67.500 -18604 R Hari.... County Department of Public ...alth 23592

Improvement Permit

A building permit cannot be issued with only an Improvement Permit
PROPERTY LOCATION: NC 27
ISSUED TO: Wyn Cont. SUBDIVISION TWSCO Pointe LOT # 9
NEW REPAIR EXPANSION Site Improvements required prior to Construction Authorization Issuance:
Type of Structure: SFO - 44x35 - 3 BC
Proposed Wastewater System Type: 25% And ton System
Projected Daily Flow: 360 GPD
Number of bedrooms: Number of Occupants: max
Basement  Yes  No
Pump Required:   Yes   No   May be required based on final location and elevations of facilities
Type of Water Supply:  Community & Public   Well Distance from well 50 feet   Permit valid for: Five years   Permit conditions: STUB Out Plumbing Shallow where Shown, at grand level   No expiration   Meet on 1, te for Final Layout   Only her
Permit conditions: STUB art Plumbing Shallow where shown, at grand level   No expiration
Meet on site for Final hagest orhiver
maintain All Setuacki
Authorized State Agent:: Date: 01-16-08 SEE ATTACHED SITE SKETCH
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.
ISSUED TO: Wyon Const. PROPERTY LOCATION: MC 27
SUBDIVISION TINSER POINTS LOT # 9
Facility Type: SFO - 44x3t - 3BR - New Expansion - Repair
Basement?  Yes No Basement Fixtures? Yes No
Type of Wastewater System** 257 Ad- 531 from (Initial) Wastewater Flow: 363 GPD
(See note below, if applicable (Repair)
- The state of the
Installation Requirements/Conditions
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Septic Tank Size   OOD   gallons   Exact length of each trench   / x 300   feet   Trench Spacing: Feet on Center
Pump Tank Size gallons Trenches shall be installed on contour at a Soil Cover: 6 inches
Maximum Trench Depth of: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
(Trench bottoms shall be level to $\pm \frac{1}{4}$ " 36" above the trench bottom)
in all directions)
D. D. COM.
Aggregate Depth: inches above pipe
Conditions: inches total
**If applicable: I understand the system type specified is different from the type specified on the application. I accept the specifications of this permit.
Owner/Legal Representative Signature: Date:
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.
SEE ATTACHED SITE SKETCH
Authorized State Agent: Date: 01-16-08
Construction Authorization Expiration Date: 01-16-2017
Construction Authorization Date. 01-16-201

## Harnett County Department of Public Health Site Sketch



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