HTE# 07-5-18756

## Harmet County Department of Public malth 24138

Improvement Permit

A building permit can	annot be issued with only an Improvement Permit
ISSUED TO: Raynor Builders	PROPERTY LOCATION: 5R 1429 Chalyberte SUBDIVISION Dexterfield LOT # 46
NEW REPAIR   EXPANSION	Site Improvements required prior to Construction Authorization Issuance:
Type of Structure: < FD 50 X60	
Proposed Wastewater System Type: Punto Accepted	
Projected Daily Flow: GPD	
Number of bedrooms: Number of Occupants: 8	max
Basement ☐Yes ☐ No Pump Required: ☐Yes ☐ No ☐ May be required based on final	location and elevations of facilities
	tance from well feet Permit valid for: Five years
Permit conditions:	□ No expiration
1	
Authorized State Agent: Luya Main (1.)	Date: 11/6/2007 SEE ATTACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guarantees the issuance of this permit by the Health Department in no way guarantees the issuance of the issuance of this permit by the Health Department in no way guarantees the issuance of	suance 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 inte	stended 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	ge Treatment and Disposal and to conditions of this permit.
Const	truction Authorization
	truction Authorization
	Required for Building Permit)
installed in accordance with the attached system layout.	.1956, .1957, .1958. and .1959 are incorporated by references into this permit and shall be met. Systems shall be
ISSUED TO: Layner Builder	PROPERTY LOCATION: 5R1429
	PROPERTY LOCATION: 5R1429 SUBDIVISION Dexterfield LOT # 46
Facility Type: SFD 50 XG0 New	w 🗆 Expansion 🗆 Repair
Basement?  Yes No Basement Fixtures?  Yes	□ No
Type of Wastewater System** Pomp to Accepted	(Initial) Wastewater Flow:GPD
(See note below, if applicable □)	
(see note below, if applicable )	(Repair)
Installation Requirements/Conditions	
Santia Tank Gra 1000 gallens Event langth of	of each trench 2 ×150 feet Trench Spacing: Feet on Center
	I be installed on contour at a Soil Cover: 6/2 inches
	anch Depth of: $18-28$ inches (Maximum soil cover shall not exceed
	oms shall be level to +/-1/4"  36" above the trench bottom)
in all direction	
D D : CDM	inches holow nine
	Aggregate Depth: inches above pipe
Conditions: Drain liner to be intelled	Aggregate Depth: inches above pipe  d: ~ 5ept: earement inches total
**If applicable: I understand the system type specified is di	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	e 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 provision	sions of the Laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit.
Authorized State Agent Super Mchine R.	Date: 11/6/2907  Date: 11/6/2907  Onstruction Authorization Expiration Date: 11/6/2012
Authorized State Agent 1	Date: 11/6/2901
Con	onstruction Authorization Expiration Date: 11/6/26/2

## Harnett County Department of Public Health Site Sketch

ISSUED TO: Raynor Builder	PROPERTY LOCATON: 5R 1429 SUBDIVISION Dextertiald	LOT # 46
Authorized State Agent: Luya Mining	R.S. Date: 11/6/2007	

Septic Exement for Lot 46 25 trans Repair Arxiv 169, 169, 169

Tower

