HTE# 07-5-1988338

## Harnett County Department of Public Health

24901

## Improvement Permit

A building permit cannot be issued with only an Improvement Permit

0	PROPERTY LOCA	ATION:	NU. 1	
ISSUED TO: RAM DEVELOPMEN		CAROLINA	ORKS	LOT # <u>32</u>
NEW ☑ REPAIR ☐ EXPANSION	N 🗆	Site Improvements requ	uired prior to Construction Autho	orization Issuance:
Type of Structure: SFD (52×48')				
Proposed Wastewater System Type: 25% REDU	CTION			
Projected Daily Flow: 360 GPD				
Number of bedrooms: 3 Number of Occup	ants:max			
Basement □Yes 🔀 No				
Pump Required: 🗆 Yes 🗆 No 🔀 May be requi	red based on final location and elev	ations of facilities		
Type of Water Supply:  Community Public	☐ Well Distance from well	100 feet	Permit valid for:	Five years
Permit conditions:				☐ No expiration
Authorized State Agent::	Date: _	C/20/08	SEE AT	TACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guaran	tees the issuance of other permits. The permi	t holder is responsible for chec	king with appropriate governing bodies	in meeting their requirements. This
site is subject to revocation if the site plan, plat, or the intended use ch	anges. The Improvement Permit shall not be	affected by a change in owner	ship of the site. This permit is subject to	o compliance with the provisions of
the Laws and Rules for Sewage Treatment and Disposal and to conditions	of this permit.			
	Construction Au	thorization		
	(Required for Build			
The construction and installation requirements of Rules .1950, .1952, .19	c 0201 bas 8201 7201 8201 7201 82	re incorporated by references in	nto this normit and shall he most Sustan	or chall be installed in accordance
with the attached system layout.	51, 11755, 11756, 11751, 11756, and 11757 a	ac incorporated by references in	nto this periore and shan be met. System	is snall be installed in accordance
ISSUED TO: RAM DEVELOPMEN	PROPERTY	LOCATION:		
	SUBDIVISI	_	n Mars	LOT # 35
Facility Type: 550 (52 x43)			W 0 % P	rn # <u>&gt;&amp;</u>
<b>—</b>	New 🔲 Expan	sion 🗌 Repair		
Basement?  Yes  No Basement Fixt				7.10
	EDUCTION SYSTEM		(Initial) Wastewater Flow:	<u> 260</u> GbD
(See note below, if applicable $\square$ )	• .			
Pume To 2	5% REDUCTION	(Repair)		
Installation Requirements/Conditions	Number of trenches 1	, ,		
Septic Tank Size <u>LOOO</u> gallons	Exact length of each trench	feet	Trench Spacing:	Faat on Cantar
Pump Tank Size gallons	Trenches shall be installed on c		• • •	inches
ganons	Maximum Trench Depth of:			
			(Maximum soil cover shall	
	(Trench bottoms shall be level to	to +/-1/4"	36" above the trench bot	ttom)
	in all directions)			
Pump Requirements:ft. TDH vs	_ GPM			inches below pipe
			Aggregate Depth:	inches above pipe
Conditions:			00 0 1	inches total
				menes total
**!! 1" -1 1 1 1 1 1 1 -	· /// / / / /			
**If applicable: / understand the system type specified	is different from the type specific	ed 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, pl.	at, or the intended use changes. The Constru	ction Authorization shall not be	transferred when there is a change in o	ownership of the site. This
Construction Authorization is subject to compliance with the provisions of	the Laws and Rules for Sewage Treatment an	d Disposal and to the condition	ns of this permit. SEE	ATTACHED SITE SKETCH
The second secon			en dem eine de met seine de le dem de 1,500 gan eine eine eine alle debit de remaine met de cele deur	
Authorized State Agent:	ns l	Date:	6/10/18	
nutitorized state agent.				
	Construction Author	ization Expiration Da	te: 6 10 13	

## Harnett County Department of Public Health Site Sketch

0 0	PROPERTY LOCATON:	
ISSUED TO: KAR DEVELORMENT	SUBDIVISION CAROLINA OAKS	LOT # 32
Authorized State Agent:	Date: 6/10/08	

