HTE# 07.500-188972 Harnest County Department of Public health 24475 Improvement Permit

A building permit cannot be issued with only an Improvement Permit Carress Land PROPERTY LOCATION: 1121 NEW 🔀 Site Improvements required prior to Construction Authorization Issuance: Type of Structure: SFD - 54x33 - 30c Proposed Wastewater System Type: Wan to 25% Red. 5 1 Projected Daily Flow: 343 Number of bedrooms: Number of Occupants: _____ Basement Yes No Pump Required: 524Yes □ No May be required based on final location and elevations of facilities Type of Water Supply:
Community Public
Well Distance from well
For feet
Permit valid for:
Five years

Permit conditions:
FUD 0-+ Flumbing Shallow At Saand / cral on higher
No expiration

Where shows
Alsot Backs Date: <u>07-14-04</u> 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. ISSUED TO: Council Land PROPERTY LOCATION: 1125

SUBDIVISION FOR 7 ON K LOT # 160 Facility Type: SFO. 54x72 3BR New Expansion Repair Basement? Yes No Basement Fixtures? Yes No
Type of Wastewater System** (Initial) Wastewater Flow: 36 GPD (See note below, if applicable 🕎 Installation Requirements/Conditions Septic Tank Size 1000 gallons Pump Tank Size 1000 gallons Exact length of each trench / 1225 feet Trench Spacing: 7 Feet on Center Trenches shall be installed on contour at a 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. GPM inches below pipe Aggregate Depth: ______ inches above pipe 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: ___ 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. Date: 02-14-08 Authorized State Agent: _

Construction Authorization Expiration Date: 07-14 2017

HTE# 07-520-18897R

Permit # 2447

Harnett County Department of Public Health Site Sketch

ISSUED TO: CAMPOLI LAND	PROPERTY LOCATON:_ SUBDIVISION	FOREIT OAK	_ LOT # <i>[6</i> \
Authorized State Agent:		Date: 0.2-14-08	
80	178		
13 /13	700	81	10 Hase Kent
JI, Cry Ros Chry	0 6 5 7 6	36'	51
Val	12 Oak m	Y	

Med Onite - STUB Ort Plumbing Shallow at ground level Or higher where shown 9 Pumping Not Be Required maintain All set Oncks Install 14205 of 25% Nelection System at 18"