HTE# 17-5-1894Z

Harnett County Department of Public mealth 24421

Improvement Permit

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: SR/705+ 1704 TEACHMAN RD SUBDIVISION GARRY Coley

Site Improvements required prior to Construction Authorization Issuance: ISSUED TO: - BIM Bushers UC EXPANSION [SFD Type of Structure: Proposed Wastewater System Type: 25% (CA) Warrow Projected Daily Flow: 366 Number of Occupants: 6 max Number of bedrooms: 3 Basement Yes ☐ May be required based on final location and elevations of facilities Pump Required: ☐Yes Type of Water Supply:

Community Public Well Distance from well feet Permit valid for: ■ No expiration Permit conditions: 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: S/1705 011> Francy and + 1704 7365L

SUBDIVISION Grany Cekey LOT #]

New Expansion
Repair ISSUED TO: BIM BUILDERS LLC Wastewater Flow: 360 GPD 25% RED UOTON Type of Wastewater System** (Initial) (See note below, if applicable) 2540 REXXEDION Installation Requirements/Conditions Septic Tank Size _______ gallons Pump Tank Size Maximum Trench Depth of: 24 inches (Maximum soil cover shall not exceed (Trench bottoms shall be level to +/-1/4" 36" above the trench bottom) in all directions) Aggregate Depth: Z inches below pipe inches above pipe Pump Requirements: ft. TDH vs. GPM 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. SEE ATTACHED SITE SKETCH Authorized State Agent James & Marlus Hors Date: 12-12-07

Construction Authorization Expiration Date: 12-12-12

Harnett County Department of Public Health Site Sketch

