HTE# 67-5-18945

Harriett County Department of Public mealth 24554

Improvement Permit

| A building permit cannot be issued w | | |
|--|---|--------|
| 1/10/1-20/1 | CATION: Ballard Rd. | |
| / | | 5 |
| NEW ☑ REPAIR ☐ . EXPANSION ☐ | Site Improvements required prior to Construction Authorization Issuance: | |
| Type of Structure: SFD 58 X52 | | - |
| Proposed Wastewater System Type: Pump to Accepted | | |
| Projected Daily Flow: 360 GPD | | |
| Number of bedrooms: Number of Occupants: max Basement | | |
| Pump Required: ☐ Yes ☐ No ☐ May be required based on final location and ele | avations of facilities | |
| | feet Permit valid for: Five years | |
| Permit conditions: | rect refinit valid for. ☐ the years | |
| Termit controller | | |
| 0 | | |
| 1/ 1/ 25 | 1./ | 7 |
| Authorized State Agent: Suga Musain R.S. Date: | 2/4/2008 SEE ATTACHED SITE SKETCH | |
| The issuance of this permit by the Health Department in no way guarantees the issuance of other per | | eting |
| their requirements. This site is subject to revocation if the site plan, plat, or the intended use changes | s. The Improvement Permit shall not be affected by a change in ownership of the site. This | 1 |
| permit is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and I | Disposal and to conditions of this permit. | |
| | | |
| Construction A | uthorization | |
| (Required for Bu | | |
| The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .1957, .195 | | all bo |
| installed in accordance with the attached system layout. | to. and 1757 are incorporated by references into this permit and small be met. Systems small | all be |
| ISSUED TO: KMAC Custom Homes +nc. PROPER | RTY LOCATION: Ballard Rd | |
| CIRDIVI | ISION River Stone LOT # 15 | - |
| 16 | | |
| | ansion Repair | |
| Basement? Yes No Basement Fixtures? Yes No | 210 | |
| Type of Wastewater System** Pour to Accepted (Initial) | Wastewater Flow: _ 36 0 GPD | |
| (See note below, if applicable \square) | | |
| Bup to Accepted | (Repair) | |
| Installation Requirements/Conditions | | |
| | 11:15- | |
| Septic Tank Size /000 gallons Exact length of each trench | 4 x 75 feet Trench Spacing: 9 Feet on Center | |
| Pump Tank Size gallons | | |
| | /2 inches (Maximum soil cover shall not exceed | |
| (Trench bottoms shall be leve | | |
| in all directions) | s to 17171 30 above the trenen bottomy | |
| Pump Requirements:ft. TDH vs GPM | inches halaus | nina |
| rump kequirementstt. 10ft vs Grif | inches below | |
| 6 P. | Aggregate Depth: inches above | |
| Conditions: | inches | total |
| | | _ |
| **If applicable: I understand the system type specified is different from the | he type specified on the application. I accept the specifications of this perm | nit. |
| | | |
| Owner/Legal Representative Signature: | Date: | |
| Owner/Legal Representative Signature: | iges. The Construction Authorization shall not be transferred when there is a change in owner | ership |
| of the site. This Construction Authorization is subject to compliance with the provisions of the Laws are | nd Rules for Sewage Treatment and Disposal and to the conditions of this permit. | |
| () 1.16. 10 | SEE ATTACHED SITE SKETCH | |
| Authorized State Agent: (Sun K.J. | Date: 2/4/25% | |
| Authorized State Agent: Super Research Construction Authorized State Agent: Construction Authorized State Agent: | horization Expiration Date: 2/4/2 4/3 | |

Permit # 24554

Harnett County Department of Public Health Site Sketch

Authorized State Agent: Super Marie Super Research Location: Ball and Red.

Date: 2/4/2008

