HTE# 07-5- 19011

Harnes Jounty Department of Public Hand 24431

Improvement Permit

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: 5/1415 RAW/3 CH RS LOT # NEW 🗸 EXPANSION REPAIR Site Improvements required prior to Construction Authorization Issuance: Type of Structure: Proposed Wastewater System Type: Projected Daily Flow: Number of Occupants: 8 max Number of bedrooms: Basement Yes May be required based on final location and elevations of facilities Pump Required: ☐Yes ☐ No Type of Water Supply:
Community Public Well Distance from well feet Five years Permit valid for: Permit conditions: ☐ No expiration The issuance of this permit to 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, .1954, .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: HOMER FISH PROPERTY LOCATION: 3,714/5/RAWLS CH 1213 Facility Type: □ Expansion Basement Fixtures? Yes No Basement? Yes Wastewater Flow: 480 25% CBDURROW Type of Wastewater System** (Initial) (See note below, if applicable) Installation Requirements/Conditions Exact length of each trench 100 feet Trench Spacing: Peet on Center Soil Cover: Inches Septic Tank Size 1200 gallons Pump Tank Size _____ gallons 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) Aggregate Depth: 2 inches above pipe Pump Requirements: ft. TDH vs. **GPM** Conditions: **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. SEE ATTACHED SITE SKETCH Authorized State Agent

SIVIS PANDE CH 120. , LHL Authorized State Agent Short Assert State Agent # 107 ISSUED TO: HOMEN LESH PROPERTY LOCATON: STOLYING CH 1215 Site Sketch Harnett County Department of Public Health 11061 - 2-10 #31H Permit # Jy431