HTE# 07-5-19015

Harnett County Department of PublicIth 24432 Improvement Permit

	A	building permit ca	PROPERTY LOC	th only an improvement	Pernilgo MA	
ISSUED TO: BRIAN J	Ohnson Bui	bleas	SUBDIVISION	ATION.	and a	LOT #
NEW REPAIR				Site Improvements req	uired prior to Construction Au	
	20					
Proposed Wastewater System Type	25% REDU	JUD Syst	o-			
Projected Daily Flow: 360	GPD					
Number of bedrooms: 3	Number of Occu	pants:6	max		*	
Basement Yes No						
Pump Required: 🗆 Yes 🗆 No	o May be requ	uired based on final	location and elev	ations of facilities		
Type of Water Supply: 🗆 Comm	nunity Tublic	Well Dist	ance from well	50-100 feet	Permit valid for	Five years
Permit conditions:						☐ No expiration
	m.	1 16	2102	1-8.08		
Authorized State Agent:	-					ATTACHED SITE SKETCH
The issuance of this permit by the He						
their requirements. This site is subject permit is subject to compliance with						in ownership of the site. This
permit is subject to compnance with	are provisions of the tan	, and holes for seway	ge Treatment and Di	sposal and to conditions of	uns permit.	
	5	Cons	truction A.	thorization		
1 104	J 	COUR	truction At	<u>ithorization</u>		
1-46	_	(F	Required for Buil	ding Permit)		
The construction and installation requ		.1952, .1954, .1955,	.1956, .1957, .1958	. and .1959 are incorporate	ed by references into this permit	and shall be met. Systems shall be
installed in accordance with the attac		,,			7	
ISSUED TO: BRIAN JO	1/405013 13051	dens	PROPERT	Y LOCATION: SCIS	05 remide	NS.
		/	SUBDIVIS	ION	05 Pennidge	LOT #
Facility Type:	D	Nev	v □ Expa	nsion \square Repair		
Basement? Yes	No Basement Fix	xtures? Yes	No			
Type of Wastewater System**	25% estori	200 Juston	(Initial)	Wastewater Flow:	360 GPD	
(See note below, if applicable			_(/			
(, F F	25% P6000	MOD I THE	Ear	(Repair)		
Installation Requirements/Condi		771		(nepan)		
mistanation nequirements contri	DOIIS		4x			
Castie Taule Cine /AAA		Format Laurab in		60	7 16 9	
Septic Tank Size		_		80 feet	Trench Spacing:	Feet on Center
Pump Tank Size	gallons		be installed on		Soil Cover:6	inches
				em - 24 inches	(Maximum soil cover sh	
		(Trench botton	ns shall be level	to +/-1/4"	36" above the trench	bottom)
		in all direction	ns)			
Pump Requirements:	ft. TDH vs	GPM				inches below pipe
					Aggregate Depth:	2 inches above pipe
Conditions:					90. 9	inches below pipe inches above pipe
-						menes total
**If applicable: / und	derstand the system	type specified is a	lifferent from the	type specified on the	application. I accept the sp	pecifications of this permit.
Owner/Legal Representative Sign	nature:				Date:	
Owner/Legal Representative Sign This Construction Authorization is subj	ject to revocation if the	ite plan plat or the	intended use chang	os The Construction Authori	ration shall not be transferred	on there is a change in ownership
of the site. This Construction Authoriz	ation is subject to comple	ance with the provisi	ons of the laws and	Rules for Sewage Treatmen	t and Disposal and to the condit	ions of this permit
ense time sensuation addition						ATTACHED SITE SKETCH
Authorized State Agent	Jana SI	Naula	fon	5 nate:	1000 (- C)	ATTACHED SHE SKEICH

Harnett County Department of Public Health Site Sketch

PROPE	RTY LOCATON: 5/2/5	05 Pen	desKD	
ISSUED TO: BREAN Johnson Builders	NOISIVISION		0	LOT #
Authorized State Agent James & Mashant		Date:	1-24-0	8
	X Repla ISS	icas onto	1-8-08!	SKETCH

