HTE# (78.500-19235RR Harnett County Department of Public nealth

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Authorized State Agent:

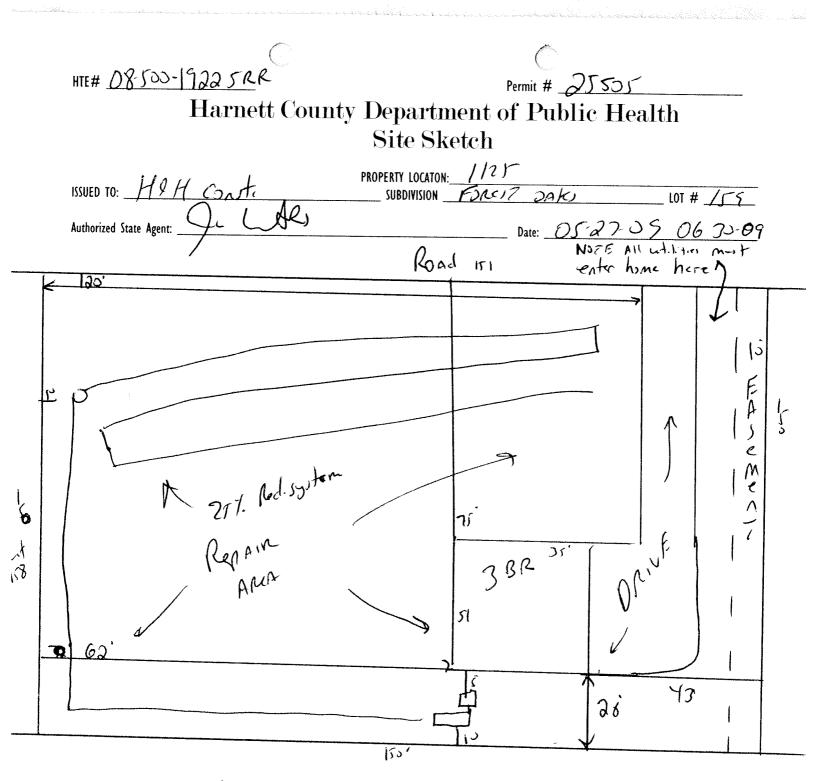
25505

Improvement Permi

	A building permit cannot be issued with only an Improvemen	t Permit
ISSUED TO: HOH COnst.	PROPERTY LOCATION: 12	
-	SUBDIVISION FORESTOR	
Type of Structure: SED - 35×51	ION □ Site Improvements re	quired prior to Construction Authorization Issuance:
Proposed Wastewater System Type: Purp P T-	25% Reduction & ten	
Projected Daily Flow: 363 may GPD		
Number of bedrooms: 3 man Number of Occ	upants: G max	
Basement TYes XNo		
Pump Required: Yes 🗆 No 🗆 May be req	uired based on final location and elevations of facilities	
Type of Water Supply: Community Supplic	Well Distance from well 00 feet	Permit valid for: 🛛 🖌 Five years
Permit conditions: Meet Onsite for	Final Lajo-t	No expiration
	hered 06-30-0	,
Authorized State Agent:	Date: 05-27-0	
The issuance of this permit by the Health Department in no way guar	rantees the issuance of other permits. The permit holder is responsible for ch	erking with appropriate governing bodies in maning their sequirement. 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 own	ership of the site. This permit is subject to compliance with the provisions of
the Laws and Rules for Sewage Treatment and Disposal and to conditi	ons of this permit.	· · · · ·
	Construction Authorization	
-	(Required for Building Permit)	
The construction and installation requirements of Rules .1950, .1952, . with the attached system layout.	.1954, .1955, .1956, .1957, .1958. and .1959 are incorporated by references	into this permit and shall be met. Systems shall be installed in accordance
ISSUED TO: HAH Const.	PROPERTY LOCATION: 12 SUBDIVISION FORCE	
	SUBDIVISION FORCIZ	DAKS LOT # 159
Facility Type: <u>SFN -35x51 - 38</u>	🔼 📈 New 🗆 Expansion 🗌 Repair	
Basement? 🗆 Yes 🛛 📈 No 🔿 Basement Fix	xtures? Yes Xo	
Type of Wastewater System**	25%. Reduction suster	(Initial) Wastewater Flow: GPD
(Nee note below it applicable 1 4) -	251. Auduction Sys. (Repair)	
Installation Requirements/Conditions	Number of trenches	
Septic Tank Size 1000 gallons	Exact length of each trench feet	Trench Spacing: Feet on Center
Pump Tank Size gallons	Trenches shall be installed on contour at a	Soil Cover: inches
/	Maximum Trench Depth of: $18-24$ inches	(Maximum soil cover shall not exceed
	(Trench bottoms shall be level to $+/-1/4$ "	36" above the trench bottom)
	in all directions)	so asole the trench solitony
Pump Requirements:ft. TDH vs		inches below pipe
	_	Aggregate Depth: incles above pipe
Conditions:		inches total
"If applicable: I understand the system type specified	d is different from the type specified on the application.	I accept the specifications of this permit.
)wner/Legal Representative Signature:		Date:
his Construction Authorization is subject to revocation if the site plan,	plat, or the intended use changes. The Construction Authorization shall not b	e transferred when there is a change in ownershin of the site. This
onstruction Authorization is subject to compliance with the provisions o	of the Laws and Rules for Sewage Treatment and Disposal and to the conditio	ons of this permit. SEE ATTACHED SITE SKETCH

Date: <u>D5-27-59</u> Construction Authorization Expiration Date: <u>の5-27-39</u>3

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Mect onlite for Final Lagat MAINTAIN All set BACK NOTE All utilities must Enter home as shown Install 185 of 25%. Reduction system At 18 rody" Deep.