HTE# 08.500-19243@ Harnett County Department of Public Health 24684

Improvement Permit A building permit cannot be issued with only an Improvement Permit ISSUED TO: Cumberland Homes

PROPERTY LOCATION: 1213

SUBDIVISION Personnen H-11

Type of Structure: SCO. 5. Site Improvements required prior to Construction Authorization Issuance: Type of Structure: SFO-56×36 - 3BR Proposed Wastewater System Type: 25% Code from Saite Projected Daily Flow: 360 GPD Number of bedrooms: ___ Number of Occupants: Basement Tes No Pump Required: 🗆 Yes 🔻 🗀 No 🔀 May be required based on final location and elevations of facilities Type of Water Supply:
Community Public Well Distance from well 50 feet Permit valid for:

Permit conditions: 57400+ Plumbry Shalbw, at Ground level or higher Five years ☐ No expiration Date: 04 · 07 - 08 Authorized State Agent:: (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. ISSUED TO: CUMber of Mediane PROPERTY LOCATION: 1213
SUBDIVISION Pers, man H.11 LOT # 87 Facility Type: SED - 56×31-3 BR New Expansion Repair

Basement? Yes No Basement Fixtures? Yes No

Type of Wastewater System** 25% Red-chin Syst. (Initial) Wastewater Flow: 365 GPD (See note below, if applicable 2) 25% Adulton System (Repair) Installation Requirements/Conditions Exact length of each trench 3 × 60 feet Trench Spacing: _____ Feet on Center Septic Tank Size 1000 gallons Pump Tank Size _____ gallons Trenches shall be installed on contour at a Soil Cover: Maximum Trench Depth of: 18-24 inches (Maximum soil cover shall not exceed (Trench bottoms shall be level to $\pm \frac{1}{4}$ " 36" above the trench bottom) in all directions) Pump Requirements: _____ft. TDH vs. GPM _____ inches below pipe Aggregate Depth: ______ inches above pipe inches total **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.

Construction Authorization Expiration Date: 04-07

Authorized State Agent: __

HTE# 08-500 - 19243R

Permit # 24684

Harnett County Department of Public Health Site Sketch

ISSI	UED TO: Cumberland Hames PROPERTY	DIVISION PERSONNON H.11 LOT # 87	
	thorized State Agent:	Date: 07-07-08	
S. S	25% Reduction Pyrain 3x 60 At 18+2 24"	Mechonite Maintain all Set Backs Stub out Plumbing Shallow At ground level of higher wher Shown. Znitall 3x60 d 25% Reduction System At 1845 A4" Deep.	
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Fair Barn Rd