HTE# 08-500- 9267

Harnett County Department of Public nealth 24483

Improvement Permit

A b	ouilding permit cannot be issued wit	' \ \ \ \	ermit		
KUIED TO KEAT PIERCE	PROPERTY LOCA	^	1. 31		
133010 10.	SUBDIVISION _	Persimm		LOT # 23	
NEW → REPAIR □ EXPANSION		Site Improvements requ	ired prior to Construction Authoriz	ration Issuance:	
Type of Structure: SFD - 31×54 - 3	512				
Proposed Wastewater System Type: Pump 15 Q	1 1- hed- 5 25.				
Projected Daily Flow: 360 GPD					
Number of bedrooms: Number of Occupa	ints:max				
Basement □Yes ☑ No □ May be required: X□Yes □ No □ May be required.	ed based on final location and eleva	ations of facilities			
Type of Water Supply: Community Public			Permit valid for:	₩ Five years	
Permit conditions: Mect on the n				☐ No expiration	
STUB O-t Plumbing L				_ no expiration	
J. 2 0-1 1101-3118 C	1.00 2 31 0 001				
Authorized State Agent: Date: 02-23-5 SEE ATTACHED SITE SKETCH 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 Build				
The construction and installation requirements of Rules .1950, .19 installed in accordance with the attached system layout.	152, .1954, .1955, .1956, .1957, .1958.	and .1959 are incorporated	by references into this permit and s	hall be met. Systems shall be	
ISSUED TO: Red Perce	PROPERT	Y LOCATION: 121	3		
1330LD TO. TREET	CURDIVIC	ON Pactions	H. 11	LOT # 20	
Facility Type: SFD-3/XSY-3BR A New Expansion Repair					
		ision in Repair			
Basement? Type of Wastewater System** Party 25 & Red System (Initial) Wastewater Flow: 365 GPD					
Type of Wastewater System** Kung to 25%	Med-535. (Initial)	wastewater riow.	Jes dru		
(See note below, if applicable ♥)	POAIR	(Danair)			
101 05 5 50 50 FM 100 F	CANC	(Repair)			
Installation Requirements/Conditions					
		10-5	T 16 : 9	Foot on Contra	
Septic Tank Size 1000 gallons	Exact length of each trench 1		Trench Spacing:		
Pump Tank Size 1000 gallons	Trenches shall be installed on			inches	
	Maximum Trench Depth of:	, -	(Maximum soil cover shall		
	(Trench bottoms shall be level	to +/-1/4"	36" above the trench bot	tom)	
	in all directions)				
Pump Requirements:ft. TDH vs	_ GPM			inches below pipe	
			Aggregate Depth:	inches above pipe	
Conditions:				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:			Date:		
Owner/Legal Representative Signature: Date: 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.					
	10.			TACHED SITE SKETCH	
Authorized State Agent:	(NC)	Date:	02.20-08		
	Construction Author		ate: 02-20-201.		

Harnett County Department of Public Health Site Sketch

	ISSUED TO: Kent Prance	PROPERTY LOCATON:	210 ersimmon Hill LOT # 20	
	Authorized State Agent:	Date: 02-25-08		
	/	212		
			110 110	
			27	
`	\			
	131 Mar	De.h		
			1 1 123	
		382	5-1	
		0	52'	
		ax, ac	45'	
	\		145,	
		old Field 1	100	

STUB Out Plumbing where shown Maintain All Set Backs Meet onsite Zostall 1×300 1/25%. Reduction System At 18"