HTE# 08-5-1935Z

Harnett County Department of Public Health 24603

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

n bullying period	PROPERTY LOCATION: /twy 27	
SSUED TO: BRANDON ALLEN NORRES	SUBDIVISION milat they vorces LOT #	2
NEW ☑ REPAIR □ EXPANSION □	Site Improvements required prior to Construction Authorization Issuance:	
Type of Structure:		
Proposed Wastewater System Type: 250/2 Nervonos		
Projected Daily Flow: 360 GPD		
Number of bedrooms: 3 Number of Occupants: 6	max	
Basement Yes No		
Pump Required: □Yes □ No ☑ May be required based on f	final location and elevations of facilities	
Type of Water Supply: Community Public Well	Distance from well feet Permit valid for: 🗹 Five years	
Permit conditions:	No expirat	tion
Authorized State Agent: James Manhan & w	Date: 2-21-08 SEE ATTACHED SITE SKETCH	Н
The issuance of this permit by the Health Department in no way guarantees the	e issuance of other permits. The permit holder is responsible for checking with appropriate governing bodies in	n meeting
their requirements. This site is subject to revocation if the site plan, plat, or the	e intended use changes. The Improvement Permit shall not be affected by a change in ownership of the site.	
permit is subject to compliance with the provisions of the Laws and Rules for So	ewage Treatment and Disposal and to conditions of this permit.	
Cor	nstruction Authorization	
	SEC. IN THE SECRET SEC. ON	
The construction and installation requirements of Bules 1000, 1003, 1004, 10	(Required for Building Permit) 1755, .1956, .1957, .1958. and .1959 are incorporated by references into this permit and shall be met. System	ns shall he
installed in accordance with the attached system layout.	33, 1730, 1737, 1730. and 1737 are incorporated by references into this perinic and shall be met. System	is shall be
ISSUED TO: Brandon MIGN NORRES	PROPERTY LOCATION. 17wn 27	
SSOLD TO. DYGING ORY TYPY	SUBDIVISION Michael + Kay Norral LOT #	1
Facility Type:	New □ Expansion □ Repair	
Basement? ☐ Yes ☐ No Basement Fixtures? ☐ Ye	es 🗆 NO	
Type of Wastewater System** 23 9610-00011020 345 F	(Initial) Wastewater Flow: GPD	
Type of Wastewater System** 25% TEDUCTION System (See note below, if applicable 25% TEDUCTION System 25%	(Repair)	
Installation Requirements (Conditions	(nepair)	
Installation Requirements/Conditions	7 1/	
	th of each trench feet	
	hall be installed on contour at a Soil Cover: inches	
	Trench Depth of: 24" max inches (Maximum soil cover shall not exceed	
(Trench bo	ottoms shall be level to +/-1/4" 36" above the trench bottom)	
in all direc	ctions)	
Pump Requirements:ft. TDH vs GPM	Aggregate Depth: inches be	elow pipe
	Aggregate Depth: Z inches a	bove pipe
Conditions:	/ = .	ches total
Conditions.		circo total
**If applicable: I understand the system type specified	is different from the type specified on the application. I accept the specifications of this p	permit.
Owner/Legal Representative Signature:	Date:	
	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 pr	rovisions of the Laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit.	
n 10 100	SEE ATTACHED SITE SKE	ETCH
Authorized State Agent: James & Manharet	Date: 2-21-08	
The same of the sa	Construction Authorization Expiration Date: 2-21-13	
//	Construction Audionization Expiration Date	

Harnett County Department of Public Health Site Sketch

		one	sketch			
£ ///	1	PROPERTY LOCA	TON: 1twy	7 7		
ISSUED TO: BRANDON AILEN	NOMIS		IN michne		Nonnis	LOT #
Authorized State Agent		Jours		Date:	2-20-0	8
STUB PlumBED ONT AT GRANGE IN CONVER OF HOME.	FEED - ST.	S. S. S. S. MAY S. R. S. S. C.	25 25 25 25 25 25 25 25 25 25 25 25 25 2	, A		