HTE# 08-5-19481

Harnett County Department of Public Health 24606 Improvement Permit

A building permit cannot be issued with only an Improvement Permit

MILLER TO DATI R. 11		DBADEBTY LACAT	ON: 5/2 1447	22. /	(Pl)
ISSUED TO: DAII Baulde NEW REPAIR EXP	ANSION [SUBDIVISION Z	na GNOITA C	CREST	LOT # 24
Type of Structure: 3 FD		Site Improvements required prior to Construction Authorization Issuance:			
Proposed Wastewater System Type: 25% 260	UKROW Juston	L			
Projected Daily Flow:GPDGPD	,				
Number of bedrooms: 3 Number of (Basement □Yes □ No	Occupants: <u>6</u> n	nax			
Pump Required: Yes No May be	required based on final loc	ation and elevati	ons of facilities		
Type of Water Supply: Community Publi Permit conditions:	IC LJ Well Distance	e from well	feet	Permit valid	I for:
Authorized State Agent: The issuance of this permit of the Health Department in no their requirements. This site is subject to revocation if the permit is subject to compliance with the provisions of the l	site pian, piat, or the intende	of other permits.	Improvement Parmit c	esponsible for checking with a	SEE ATTACHED SITE SKETCH ppropriate governing bodies in meeting nge in ownership of the site. This
b suject to compliance with the provisions of the f	cans and noies for sewage the	eatment and Dispos	al and to conditions of	this permit.	
	Constru	ction Autl	<u>iorization</u>		
The construction and installation requirements of Bull. Las.	(Requi	red for Building	Permit)		
The construction and installation requirements of Rules .195 installed in accordance with the attached system, layout.), .1957, .1958. an	d .1959 are incorporate	ed by references into this perr	nit and shall be met. Systems shall be
ISSUED TO: DAII Buddens I	XC	PROPERTY L	OCATION: 5/2 /	447 Rouls C	IUB RA
		SUBDIVISION	MAGUSTER	· Orest	10.8 PLS LOT # <u>24</u>
Facility Type: SFD	New	Expansio	n 🗖 Repair		LOI #
Basement? Yes No Basement	Fixtures? Yes	∠l No	•		
Type of Wastewater System** 25% PEWC	2025 545 (In	itial) V	/astewater Flow: 🚅	360 GPD	
(See note below, if applicable [])	when \				
Installation Requirements/Conditions	UCRUD Systa	5 _(Repair)		
Management redail calculations		_			
Septic Tank Size 1000 gallons	Exact length of eac	5 X	90 (T. 1. 9	_
Pump Tank Size gallons	Trenches shall be in			Trench Spacing:	Feet on Center
	Maximum Trench De			Soil Cover: 6	inches
	(Trench bottoms sha			36" above the trend	
	in all directions)				,
Pump Requirements:ft. TDH vs	GPM				6 inches helow nine
				Aggregate Depth:	inches below pipe inches above pipe // inches total
Conditions:					12 inches total
	type specified is differen	t from the type	specified on the a	application. I accept the	specifications of this permit.
Owner/Legal Representative Signature:				Date:	
was construction warmous arrior is anniect to teaocation il the	Site Dian. Diat. or the intende	d use changes. The	Concernation Auchania	diam shall and the first	
. The site. This construction Authorization is subject to compl	nance with the provisions of the	he Laws and Rules	for Sewage Treatment	and Disposal and to the condi	itions of this permit.
authorized State Agent	A Mail.	FOR	n .	3 - 20 50	E ATTACHED SITE SKETCH
authorized State Agence	-/ IMNIAN	ion Authoric :	Vate:	2-28-08 te: 2-28-	
ν	CONSTRUCT	ivii Authorizat	ion expiration Da	te:	75

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Permit # ___ 24606

Harnett County Department of Public Health Site Sketch

ISSUED TO: DAIL Burlders INC SUBDIVISION May 20/29 Crest LOT # 24

Authorized State Agent: James E Markant 2018

Date: 2-28-08

