HTE# 08-500-19529

Harnett County Department of Public alth 24674

Improvement Permit

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: 1225 SUBDIVISION Anc J. Hallowell LOT # Teact 3 B. bbens Site Improvements required prior to Construction Authorization Issuance: (8.63 Acce. Please note That home owner Requests Type of Structure: _ SED-Proposed Wastewater System Type: Purp to 25% Red. Syth Projected Daily Flow: Number of bedrooms: Number of Occupants: 8 Basement Yes Pump Required: Ves \quad No \quad 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:
Mect on it for the formal based manhan all Five years ☐ No expiration Set BACK - STUTEM 10 To be designed for Date: 03 27-08 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: CARINA BIBBENI PROPERTY LOCATION: 1225 SUBDIVISION Apre I Hallowell LOT # Track 3 Facility Type: S(A) - 40x66 Expansion 18.67AC Basement? ☐ Yes ✓ No ☐ Basement Fixtures? ☐ Yes No. lump \$ 25% Red Wastewater Flow: 480 GPD Type of Wastewater System** (Initial) (See note below, if applicable 1) (Repair) Installation Requirements/Conditions Exact length of each trench 3× \$\frac{1}{2}\$ feet Septic Tank Size 1000 gallons Pump Tank Size 1000 gallons Trenches shall be installed on contour at a Maximum Trench Depth of: (Maximum soil cover shall not exceed (Trench bottoms shall be level to +/-1/4" 36" above the trench bottom) in all directions) Pump Requirements: ______ft. TDH vs. inches below pipe Aggregate Depth: inches above pipe Conditions: inches total I understand the system type specified is different from the type specified on the application. I accept the specifications of this permit. **If applicable: 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. SEE ATTACHED SITE SKETCH Authorized State Agent: _ Construction Authorization Expiration Date: 03-27-29

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Harnett County Department of Public Health Site Sketch

ISSUED TO: CARINA	Bibbens	PROPERTY LOCATON:SUBDIVISION A	1229 nne J Hallavell	LOT # Tent 3 18.63 m
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