## HTE# 08 500-19569 Harrion County Department of Public alth 24698

**Improvement Permit** 

	A building permit ca	PROPERTY LOCA	4117	remit		
ISSUED TO: Cumberland	Homes	SUBDIVISION	1. podshir	•	10T #	215
	EXPANSION	300011131011	000	TWO SHEET STATES OF THE STATES	on Authorization Issuance:	.,
Type of Structure: SFD - 55+			site improvements req	and prior to constituted	ni nationation issuance.	
Pronosed Wastewater System Type: 2-57.	reduction City	T	-			
Proposed Wastewater System Type: 257. Projected Daily Flow: 369 GPI	)					
Number of bedrooms: 3 Number	of Occupants:	max			e	1
Basement □Yes Tho	V. V					
	be required based on final	location and eleva	ations of facilities			
		ance from well	A	Permit vali	id for: Five years	
Permit conditions: STUB Ont P						
histor where	noun	max	1 11 -1	1 H+ RAIL		
. 0	3.0		4			
$\bigcap$ $\bigwedge$ $\bigwedge$	4			,		
Authorized State Agent::	9		142108		SEE ATTACHED SITE SKETCH	
The issuance of this permit by the Health Department						
their requirements. This site is subject to revocation i					ange in ownership of the site.	This
permit is subject to compliance with the provisions of	i the Laws and Rules for Sewag	ge Treatment and Dis	posal and to conditions of	this permit.		
	Const	truction Au	thorization			
	(P	Required for Build	ling Permit)			
The construction and installation requirements of Rule				ed by references into this p	ermit and shall be met. System	s shall be
installed in accordance with the attached system layo	ut.				ŕ	
ISSUED TO: Cumberland	Homes	PROPERT	Y LOCATION: // 2	25		
	_	SUBDIVISI	ON Wood Sh	INC	LOT # 2	215
Facility Type: SFD-SJ-37-	30n × New	v 🗆 Expan				. The year
	ment Fixtures? 🖂 Yes	y No	inchair — inchair			
			Wastewater Flow: _	365 GPD		
	% 16d-ction sy	12_(IIIItiai)	wastewater riow	UID		
(See note below, if applicable )	· Reduction sy	1	(Danais)			
	· reduction sy	1700	(Repair)			
Installation Requirements/Conditions	·					
10		9 9 N 9	1. 100		9	
Septic Tank Size/Ooo gallons	Exact length of	of each trench _	1 leet	Trench Spacing:	Feet on Center	
Pump Tank Size gallons		be installed on		Soil Cover:	inches	
	Maximum Tren	ich Depth of: 🔟	74524 inches	(Maximum soil cov	ver shall not exceed	
	(Trench botton	ns shall be level	to +/-1/4"	36" above the tr	rench bottom)	
	in all direction					
Pump Requirements:ft. TDH v		/			inches be	low pipe
rump requirements.	0111			Aggregate Depth:	inches al	100
Conditions				Aggregate Deptil		thes total
Conditions:					IIIC	lies total
**** ** 11		1:00 1 1 1	· · · · · · · · · · · · · · · · · · ·		d	
**If applicable: I understand the	system type specified is d	imerent from the	type specified on the	application. I accept t	the specifications of this p	ermit.
Owner/Legal Penracentative Signatures				Data		
Owner/Legal Representative Signature: This Construction Authorization is subject to revocation	on if the cite plan plat as the	intended use shapes	The Construction Author	Date:		ownership
of the site. This Construction Authorization is subject to revocation						Ownership
2. 2.2 Substitution numbers 3 subject	\	vi siis kana anu	-	•	SEE ATTACHED SITE SKE	TCH
Authorized State Agent:	(M)		Date	042108		
Authorized State Agent.	Me					
1	Cor	nstruction Autho	rization Expiration l	Date: 04.21-	2013	

HTE# 28.500195691

## 95691 Permit # <u>24698</u> Harnett County Department of Public Health Site Sketch

Authorized State Agent:	lot'		late: 04:2/-	08
,		71,		
			/	JSS'
			/ 5	74Box
	5%. Reduction 500		\ / P	lumbing
	Tol. Rediction 55)		1 1 /	
1 11/80 0	3 1			hallow At
13 17 18			1 gro	und level o
			high	her
	T Pate		/ Maint	Ain all sct
و ا			Install	12/20 A LT- K
251. kun			18 to 24	
25°l. ped-stron		12'	1010	
35.				
2 444				
Min	14.			
	70			
		1/		