HTE# 08-5-19595

Harnett County Department of Public Health

24706

Improvement Permit

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: LASKER PO (502 2046)	
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NEW X Site Improvements required prior to Construction Authorization Issuance: Sype of Structure: SED (66.458) Site Improvements required prior to Construction Authorization Issuance:	
Proposed Wastewater System Type: ACCEPTED SYSTEM	
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 final location and elevations of facilities	
Type of Water Supply: Community Public Well Distance from well 100 feet Permit valid for: Five years	
Permit conditions: No expiration	
14/1 13	_
Authorized State Agent:: Date: 3) 28 GS SEE ATTACHED SITE SKETCH	_
the issuance of this permit by the Health Department in no way guarantees the issuance of the permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements.	This
ite 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 provision	ns of
he Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.	
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Construction Authorization	
(Required for Building Permit)	
he 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 accorda with the attached system layout.	ince
SSUED TO: HUGH SURVES BUILDERS WC PROPERTY LOCATION: LASATER RP	
SUBDIVISION 3C ADAMS INC LOT # 4	_
acility Type: SFD (66'x58') New Expansion Repair	_
Basement? Yes No Basement Fixtures? Yes No	
Type of Wastewater System** ACCEPTED SYSTEM (Initial) Wastewater Flow: 360 GPI	n
See note below, if applicable \square)	U
FILL SYSTEM (Repair)	
nstallation Requirements/Conditions Number of trenches (Repair)	
eptic Tank Size 1000 gallons Exact length of each trench 385 feet Trench Spacing: 9 Feet on Center	
Pump Tank Size gallons	
Maximum Trench Depth of: 12-14 inches (Maximum soil cover shall not exceed	
(Trench bottoms shall be level to +/-1/4" 36" above the trench bottom)	
in all directions)	
Conditions: MINIMUM OF 6" OF CENER NEEDED OVER DEMINFIELD Aggregate Depth: inches above inches	
OPERATIONS PERMIT WILL BE 1550ED AFTER FINAL GRADING OVER DEALNERED inches	totai
The state of the s	-
*If applicables I understand the system type specified is different from the type specified on the application I count the system of this applicable.	+
*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:	
his 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	
onstruction 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.	CH
authorized State Agent: Date: 3 28 89	
Construction Authorization Expiration Date: 3) 3 13	1 1

Harnett County Department of Public Health Site Sketch

