HTE# <u>08.532-19807</u> Harnett County Department of Public Health

24874

Improvement Permit

A building permit cannot be issued with only an Improvement Permit				
ISSUED TO: Weaver Dev.	PROPERTY LOCA			
ISSUED TO: Weaver Dev.	SUBDIVISION _	The Syr	$\eta m \cdot T$	LOT # <u>92</u>
NEW TY REPAIR DEXPANSION DESCRIPTION DESCRIPTION DESCRIPTION DESCRIPTION DE L'ARCHITECTURE DE L'ARCHIT		Site Improvements re	quired prior to Construction	n Authorization Issuance:
Proposed Wastewater System Type: 25%. Ada-t-	Ba			
Projected Daily Flow: 340 GPD	3~ 1917er			
Number of bedrooms: Number of Occupants:	(may			
Basement 🗆 Yes 🖈 No				
	ased on final location and eleva	ations of facilities		
Type of Water Supply: 🗆 Community 🔼 Public 🖂 Well Distance from well 🔼 feet . Permit valid for: 🖼 Five years				
Permit conditions: Meet on site for Final Land - Maintain All Set Backs No expiration				
STUB Out Plumbing stal	How, At YM	omd /cve	1 or higher	- Where shown
The state of the s				
Authorized State Agent:	Date:	6.29-5	<u> </u>	SEE ATTACHED SITE SKETCH
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 thi	s permit	,	The state of the period of	subject to compliance with the provisions of
			-	
	Construction Au	thorization		
	(Required for Build			
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: LACANCE Dev. PROPERTY LOCATION: //Y/				
SUBDIVISION The Summer LOT # 92				
Facility Type: SFD-56×50-3BA	New Expans	ion 🗆 Repair		
Basement? Yes No Basement Fixtures? Yes				
Type of Wastewater System** 25% / leduction System (Initial) Wastewater Flow: 360 GPD				
(See note below, if applicable)	to oth	_(Repair)		
Installation Requirements/Conditions Num	nber of trenches			_
Septic Tank Size 1000 gallons Example Example 1000 gallons	ct length of each trench $oldsymbol{\perp}$	KO feet	Trench Spacing:	7 Feet on Center
Pump Tank Size 1000 gallons 7	iches shall be installed on co	optour at a	Soil Cover:	inches
If Needed Wax	imum Trench Depth of: 🔟	$\frac{Y \cdot \partial Y}{}$ inches	(Maximum soil cover	shall not exceed
(Tre	nch bottoms shall be level to	o +/-1/4"	36" above the tren	ich bottom)
in a	ll directions)			,
Pump Requirements:ft. TDH vs GPI	1			inches below pipe
			Aggregate Depth:	inches above pipe
Conditions:				inches total
**If applicable: / understand the system type specified is di	ferent from the type specifie	d on the application.	. I accept the specification	ons of this permit.
	,, ,	,,	, ,	,
Owner/Legal Representative Signature:			Date:	
This Construction Authorization is subject to revocation if the site plan, plat, or t				ange in ownership of the site. This
Construction Authorization is subject to compliance with the provisions of the Lav				SEE ATTACHED SITE SKETCH
1 11	A STATE OF THE PARTY OF THE PAR		/	7,000,000,000,000,000,000,000,000,000,0
Authorized State Agent: \(\square\)	1	Date:	6273Y	
	Construction Authori		ate: 620-201	17
,		Expiration D	~~~ <u>~~~</u>	

HTE# 08 502-19807/

CATTLE ROCK

Permit # <u>24874</u>

Harnett County Department of Public Health Site Sketch

