HTE# 08-500-2009 2 Harnett County Department of Public Health

24797

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

1 £ 1 / 1		ION: 1/25	i crimt	
ISSUED TO: MC CONST.	SUBDIVISION	FORC) (DA	aks	LOT # <u>197</u>
NEW REPAIR EXPANSION		Site Improvements req	uired prior to Construction Au	thorization Issuance:
Type of Structure: SFO - 45244 - 38c				
Proposed Wastewater System Type: Aur pt. 25%. Rod J. Projected Daily Flow: 360 GPD	TEM			
	max			
Basement Yes No	illax			
Pump Required: ★ No May be required based on final lo	ocation and elevat	ions of facilities		
Type of Water Supply: Community Public Well Distance	ce from well	feet	Permit valid for	: 😾 Five years
Permit conditions: Mect Unsite - maintain	Allset	BACKI		☐ No expiration
Authorized State Agent:	Date:	16.02.	O V (FF	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 che	cking with appropriate governing bodi	es in meeting their requirements. This
site is subject to revocation if the site plan, plat, or the intended use changes. The Improvement I the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.	Permit shall not be a	ffected by a change in owne	rship of the site. This permit is subject	ct to compliance with the provisions of
the tams and noises for sewage freatment and disposal and to conditions of this perinit				
Constru	uction Aut	horization		
	uired for Buildin			
The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .1957,			into this permit and shall be met. Sy:	stems shall be installed in accordance
with the attached system layout.				
ISSUED TO: M&H Cont.	PROPERTY	LOCATION: 1/2	Γ	
	CHRUNICIO	N GORGIT	roak)	LOT # / 97
Facility Type: SFD: 45 x 44 - 3BA New	Fynanci	on Donair		
Basement? Yes No Basement Fixtures? Yes Type of Wastewater System** Yes Yes Yes Yes Yes	✓ No '	1		
Type of Wastewater System** Puro to 25% Red	Caction	rutur	(Initial) Wastewater Flo	w: 365 GPD
(See note below, if applicable) 25% Rod for		_(Repair)	(
Installation Requirements/Conditions Number of trench		_(nepair)		
		Y() feet	Trench Spacing: 7	Feet on Center
Pump Tank Size gallons Trenches shall be	installed on co	ntour at a	Soil Cover:	inches
,	4	~	(Maximum soil cover sha	
(Trench bottoms s	•		36" above the trench	
in all directions)				
Pump Requirements:ft. TDH vs GPM				inches below pipe
			Aggregate Depth:	inches above pipe
Conditions:			00 0 1	inches total
**If applicable: / understand the system type specified is different from ti	he type specified	d on the application.	I accept the specifications	of this permit.
Owner/Legal Representative Signature:			Date:	
This Construction Authorization is subject to revocation if the site plan, plat, or the intended use ch				•
Construction Authorization is subject to compliance with the provisions of the Laws and Rules for Se	ewage Treatment and	Disposal and to the condition	ns of this permit. S	EE ATTACHED SITE SKETCH
() $()$ $($ $)$			A = = = = = = = = = = = = = = = = = = =	
Authorized State Agent:	·	Date: _	06,02.01	
T Constru	uction Authoriz	ation Expiration Da	ate: 06-00-	371 3

HTE# 08-500-20092

Permit # <u>24797</u>

Harnett County Department of Public Health Site Sketch

