## HTE# 08-5-20147 Harnett County Department of Public Health

24806

## Improvement Permit

A building permit cannot be issued with only an Improvement Permit ISSUED TO; Sherloch Homes DM INC SUBDIVISION TOUCKORE Site Improvements required prior to Construction Authorization Issuance: Type of Structure: Proposed Wastewater System Type: 25% 126000700 Projected Daily Flow: 360 GPD Number of bedrooms: 3 Number of Occupants: 4 max Basement TYes May be required based on final location and elevations of facilities Pump Required: ☐Yes ☐ No Type of Water Supply: 
Community Public Well Distance from well feet Permit valid for: Five years Permit conditions: ☐ No expiration Authorized State Agent Amen Manhant Date: 6-3-08 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: Sherlock Homes DM Tax. PROPERTY LOCATION: SF 1437 BALLMED 12D

SUBDIVISION RIVEZSTONE

L SUBDIVISION KIVE 25+000

New 
Expansion 
Repair Facility Type: \_\_\_\_\_SFD Basement? Yes No Basement Fixtures? Yes No Type of Wastewater System\*\* 25% REDUCTUD Sys FB (Initial) Wastewater Flow: 360 GPD (See note below, if applicable Installation Requirements/Conditions Septic Tank Size /OOO gallons Pump Tank Size \_\_\_\_\_ gallons Maximum Trench Depth of: 36 - 3/8 inches (Maximum soil cover shall not exceed (Trench bottoms shall be level to +/-1/4" 36" above the trench bottom) in all directions) Aggregate Depth: \_\_\_\_\_\_ inches below pipe inches above pipe Pump Requirements: \_\_\_\_\_ft. TDH vs. GPM \*\*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: 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. Authorized State Agent: Construction Authorization Expiration Date: 6-3-13

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## Harnett County Department of Public Health Site Sketch

PROPERTY LOCATON: 5/437 Balland RS

ISSUED TO: Shee lock Homes DM FRE SUBDIVISION REvers fore LOT # 5

Authorized State Agent: Date: 6-3-08

