HTE# 08-5-20190

Harnest County Department of Public scalth

24905

Improvement Permit

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: Hwy 2105 ISSUED TO: KESHIA HARRYS + LOIS HARRYS SUBDIVISION LIBBIE HARRYS Site Improvements required prior to Construction Authorization Issuance: SFO (62'X46') Type of Structure: Proposed Wastewater System Type: _ CONVENTIONAL 360 Projected Daily Flow: Number of Occupants: Number of bedrooms: Basement Yes No X No ☐ May be required based on final location and elevations of facilities Pump Required: TYes Five years Type of Water Supply:
Community Public Well Distance from well 100 feet Permit valid for: Permit conditions: ■ No expiration Authorized State Agent:: 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 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: KESMIA HARRIS + LOIS HARRIS PROPERTY LOCATION: HWY 2105 SUBDIVISION LIBBIE HARRIS LOT # Facility Type: 500 (65×46) Expansion Repair Basement Fixtures?

Yes CONVENTIONEL Type of Wastewater System** (Initial) Wastewater Flow: 360 GPD (See note below, if applicable

) CONVENTIONAL Installation Requirements/Conditions Number of trenches Feet on Center Exact length of each trench 80 Septic Tank Size \OOO gallons Trench Spacing: Soil Cover: 12 Pump Tank Size _____ gallons Trenches shall be installed on contour at a Maximum Trench Depth of: 24 (Maximum soil cover shall not exceed (Trench bottoms shall be level to +/-1/4" 36" above the trench bottom) in all directions) Pump Requirements: ft. TDH vs. inches below pipe Aggregate Depth: _____ inches above pipe Conditions: **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. SEE ATTACHED SITE SKETCH Authorized State Agent: Construction Authorization Expiration Date:

Harnett County Department of Public Health Site Sketch

