Harnett County Department of Public Health 25493 HTE#08-5-20295 **Improvement** Permit A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: CHRISTIAN LIGHT RO ISSUED TO: COMFORT HOMES INC. SUBDIVISION FOREST TRAILS LOT # 105 NEW X. REPAIR 🗆 🕴 EXPANSION 🗖 Site Improvements required prior to Construction Authorization Issuance: Type of Structure: SFD (243 × 14 °V) Proposed Wastewater System Type: 25% REDUCTION Projected Daily Flow: 360 GPD Number of Occupants: G max 3 Number of bedrooms: 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 <u>100</u> feet Permit valid for: Five years Permit conditions: □ No expiration 63 Authorized State Agent:: RS Date: 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: COMEDRA HOMES LUC PROPERTY LOCATION: CHRISTIAN LIGHT SUBDIVISION FOREST TRAILS LOT # 105 Facility Type: SED (43-249) X New Expansion Repair Basement Fixtures? 🗌 Yes 🛛 No Basement? 🗆 Yes 🛛 No 25% REDUCTION SYSTEM (Initial) Wastewater Flow: 360 Type of Wastewater System\*\* GPD (See note below, if applicable  $\Box$ ) LPP (Repair) Installation Requirements/Conditions ١ Number of trenches Trench Spacing: \_\_\_\_\_ Feet on Center Soil Cover: \_\_\_\_\_ inches Septic Tank Size 1000 gallons Exact length of each trench 250feet Pump Tank Size 1000 gallons Trenches shall be installed on contour at a Soil Cover: Maximum Trench Depth of: 12 inches (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. GPM \_\_\_\_\_ inches below pipe Aggregate Depth: \_\_\_\_\_ inches above pipe Conditions: \_\_\_\_\_ inches total \*\*If applicable: I understand the system type specified is different from the type specified on the application. I accept the specifications of this permit.

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Owner/Legal Representative Signature: Date:	
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Construction Authorization is subject to compliance with the provision of the laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit.	
Authorized State Agent: Date: Date: Date: Date: Construction Authorization Expiration Date: G 3 14	



