HTE# 08-500-20710

Harnett County Department of Public Health

24967

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

401/ 0-)	PROPERTY LOCATION: 112	
ISSUED TO: 11 117 CONST.	subdivision to RC17	OAKS 10T # 195
NEW REPAIR EXPANSION		ts required prior to Construction Authorization Issuance:
Type of Structure: 50 - 50 x 59 -	1 2001K	
Proposed Wastewater System Type: 25% GPD	Inction system	
Number of bedrooms: Number of Occu Basement □Yes ✓ No	pants: 6 max	
	ind band or Color of the color	
Type of Water Supply: Community Public	ired based on final location and elevations of facilities	
		Permit valid for: Strive years SACH No expiration SACH, Mcct 205, te
Authorized State Agent:: \\ \(\omega	17 Day 9 73	0: <
The issuance of this permit by the Health Department in no way quarar		SEE ATTACHED SITE SKETCH or checking with appropriate governing bodies in meeting their requirements. This ownership of the site. This permit is subject to compliance with the provisions of
	Construction Authorization	
The construction and inetallation requirements of Bull. 1959, 1952, 1952	(Required for Building Permit)	
with the attached system layout.	54, .1955, .1956, .1957, .1958, and .1959 are incorporated by refer	ences into this permit and shall be met. Systems shall be installed in accordance
ISSUED TO: HOLL CONT.	PROPERTY LOCATION: //	
	CURDIVICION CODO	17 0061
Facility Type: SFD-50x59-3B		LOT # 195
Basement? Yes No Basement Fixt	= = = = = = = = = = = = = = = = = = =	air
Type of Wastewater System** 25%	led stus	// · · · · · · · · · · · · · · · · · ·
(See note below, if applicable)	Mar Mar	(Initial) Wastewater Flow: 365 GPD
25-7/	Mediction Gil and	
Installation Requirements/Conditions	Number of trenches (Repair)	
Septic Tank Size gallons		<u> 4</u>
Pump Tank Size gallons	Exact length of each trench 180 feet	1 0 rest on center
ganons	Trenches shall be installed on contour at a	Soil Cover: 6 inches
	Maximum Trench Depth of: 18-24 inche	(Shan not careed
	(Trench bottoms shall be level to +/-1/4"	36" above the trench bottom)
Pumn Raquiramente: 4 Thu	in all directions)	
Pump Requirements:ft. TDH vs	GPM	inches below pipe
Conditions:		Aggregate Depth: inches above pipe
conditions.		inches total
*If applicable: I understand the system type specified i	is different from the type specified on the applicati	on. I accept the specifications of this permit.
wner/Legal Representative Signature:		Date:
nis Construction Authorization is subject to revocation if the site plan, pla	t, or the intended use changes. The Construction Authorization shall n	Date:
onstruction Authorization is subject to compliance with the provisions of t	ne Laws and Rules for Sewage Treatment and Disposal and to the con	ditions of this permit. SEE ATTACHED SITE SKETCH
	1	RESIDENCE OF THE PROPERTY OF T
uthorized State Agent: Date: OX-20-08		
Construction Authorization Expiration Date: $08.30.08$		
	recion regulorization expiration	vale. Us au AUI)

HTE# <u>08 500-20010</u>

Permit # <u>24767</u>

Harnett County Department of Public Health Site Sketch

