## HTE# 08-500-20765 Harnett County Department of Public Health

25052

Improvement Permit A building permit cannot be issued with only an Improvement Permit umberland Homes PROPERTY LOCATION: ////
SUBDIVISION Ashe forc/ Site Improvements required prior to Construction Authorization Issuance: Type of Structure: SFD - 35 x 44 - 3BR Proposed Wastewater System Type: 25%. Red-itin Sus. Projected Daily Flow: 360 GPD 3 Number of Occupants: (a max Number of bedrooms: Basement Tyes X 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 100 feet Permit valid for:

Permit conditions: Meet Onsite for Five Layof Maintain All

Set Back, Stub Out Olimbing Shakov, at Snowd level or his 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 ISSUED TO: CUMbarland Homes

PROPERTY LOCATION: 111

SUBDIVISION Asharar Subdivision | Repair

Basement? | Yes | No Basement Fixtures? | Yes | No

Type of Wastewater System\*\* 25% Reduction System (Initial) Wastewater Flow: 360 GPD (See note below, if applicable) OST Reduction System (Repair)
Ons Number of trenches Installation Requirements/Conditions Septic Tank Size (OS) gallons Pump Tank Size \_\_\_\_\_ gallons (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. 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: 09-10-2017

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## Harnett County Department of Public Health Site Sketch

ISSUED TO: Cumber/and	Hones	PROPERTY LOCATION: //// SUBDIVISION Ash Bocc	INT # 19V
Authorized State Agent:	Ites	Date:	09-10-08

