HTE#<u>08-500-20</u>781

Harnett County Department of Public Health

24980

Improvement Permit

A bunuing per	PROPERTY LOCATION	/ / \		
ISSUED TO: Lyan Const.		Linsen	Pointe	LOT # 49
NEW REPAIR □ EXPANSION □			equired prior to Construction A	
Type of Structure: SFD- 44, x +2- 3BR			equite prior to constituction a	athorization issuance.
Proposed Wastewater System Type: Purp t= 25% No.	d-ctimsyst			777 (1984)
Projected Daily Flow: 360 GPD	0			
Number of bedrooms: 3 Number of Occupants: 6	max			
Basement □Yes ►No	_			
Pump Required: 🗗 Yes 🔲 No 🔲 May be required based o	n final location and elevatio	ns of facilities		
Type of Water Supply: Community Public Well	Distance from well	ofeet	Permit valid fo	r. Five years
Permit conditions: Meet ons te For F.	tropal lan			☐ No expiration
maintain all set Backs				
Authorized State Agent:: () u the	Date: O	7.07.0	S (FF	ATTACHED SITE SKETCH
The issuance of this permit by the Halth Department in no way guarantees the issuancial in subject to reversities if the first plant and the subject to reversities if the first plant and the subject to reversities if the first plant and the subject to reversities if the first plant and the subject to reversities if the first plant and the subject to reversities if the first plant and the subject to reversities if the first plant and the subject to reversities in the subject to reve	ce of other permits. The permit hol	der is responsible for c	hecking with appropriate governing has	lies in meeting their requirements. This
site is subject to revocation in the site plan, plat, or the intended use changes. The Imp	provement Permit shall not be affec	ted by a change in ow	nership of the site. This permit is subj	ect to compliance with the provisions of
the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit				
C				
<u>u</u>	onstruction Auth			
The control of the first terms of the control of th	(Required for Building	Permit)		
The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .195 with the attached system layout.	36, .1957, .1958, and .1959 are in	corporated by reference	s into this permit and shall be met. Sy	rstems shall be installed in accordance
ISSUED TO: Wan Cont.	PROPERTY I	OCATION: 10 C	27	
J	CHRDIVICION		1 Pointe	LOT # 49
Facility Type: SFO 44x42 - 3BR	New 🗆 Expansion			LUI#_ <u>//</u>
Basement? Yes No Basement Fixtures?		C Inchair		
Type of Wastewater System** Punt to 25%	Ted aton la	item	(Initial) Wastewater Flo	2/1 000
(See note below if applicable [7])	. •	717	(ilitiai) wastewater ric	ow: <u> </u>
25% Reduction	on system (R	anain)		
To all all the first of the fir	. \) ' ' '	epair)		
	f trenches	2010	9	_
	gth of each trench _ 🌊		Trench Spacing:	Feet on Center
•	shall be installed on conto		Soil Cover:	inches
	Trench Depth of: 18-0		(Maximum soil cover sh	
·	ottoms shall be level to +	-/-1/4"	36" above the trench	bottom)
in all dire	ctions)			
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 of	on the application	I accent the specifications	of this permit
, , , , , ,	7//	принации	. r accept the specimeations	or this perinic.
Owner/Legal Representative Signature:			Date:	
Uwner/Legal Kepresentative Signature: This Construction Authorization is subject to revocation if the site plan, plat, or the inten-	ded use changes. The Construction	Authorization shall not	he transferred when there is a change	in companies of the six This
Construction Authorization is subject to compliance with the provisions of the Laws and R	ules for Sewage Treatment and Diss	osal and to the condit		EE ATTACHED SITE SKETCH
A	9			
Authorized State Agent:		n	09-03-08	•
		Date:	07.00	
	Construction Authorizati	on Expiration D	late: <u>07-03-20</u>	213

HTE# <u>DX 500-2078</u>	HTE#	DX	500-	207	8
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Permit # 24983

Harnett County Department of Public Health Site Sketch

	PROPERTY LOCATON: Y) C 27	
ISSUED TO: Lyng Const.	subdivision Tinser Pointe	LOT # <u>49</u>
Authorized State Agent:	Date: 09-07.	· 08

