HTE# 08-5-20935 R

Harnett County Department of Public Health

25045

Improvement Permit

A Duli	onig perint cannot be issued with		LLE CHURCH RO	
ISSUED TO: JS PROPERTIES	SUBDIVISION	Tour CAGESTI	LLE CHURCH NO	107 // 03
NEM A BEDVID CADVICION	NOIKININGOK			LOT # <u>2)</u>
NEW X REPAIR C EXPANSION Type of Structure: SFD (84'×55') Proposed Wastewater System Type: 80 98 70 25 26 R		one improvements rec	quired prior to Construction Autho	orization Issuance:
Proposed Wastewater System Type: Rung To 25% R	four man			
Projected Daily Flow: 360 GPD	<u> </u>			
Number of bedrooms: 3 Number of Occupants	: 6 max			
Basement Yes No	пах			
. / / \	based on final location and eleva	tions of facilities		
Type of Water Supply: Community De Public	Wall Distance from well 1.6	tions of facilities	Permit valid for:	7 r
Permit conditions:	Well Distance from Well It		remmt valid for:	Five years
				No expiration
Authorized State Agent::	PS Date:	10/21/08	CEE AT	TACHED 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 the	cking with appropriate governing bodies	n meeting their requirements. This
site is subject to revocation if the site plan, plat, or the intended use change	s. The Improvement Permit shall not be a	offected by a change in owne	ership 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 Aut	thorization		
	(Required for Buildi			
The construction and installation requirements of Rules .1950, .1952, .1954, .			into this nermit and shall he met Sustan	is shall he installed in accordance
with the attached system layout.	and it is a second of the seco	, meorporated by reservices	and this period and man be met system	is shall be installed ill accordance
ISSUED TO TS D. ASSETS			C	Q o
ISSUED TO: SPROPERTYES	PROPERTY SUBDIVISIO	LOCATION: LAGO	CAULUE CHURCH	
(a)	SUBDIVISIO	N JENTIN C	Jaks -	LOT # <u></u>
Facility Type: 550 (84755)	New 🗆 Expansi	ion 🗌 Repair		·
Basement? Yes No Basement Fixtures	? 🗆 Yes 🗏 No	•		
Type of Wastewater System** Pume 10 25	LO REDUCTION SYST	EM	(Initial) Wastewater Flow:	360 GPD
(See note below, if applicable \square)			(
Pump To 25%	REGULATION SYSTEM	(Renair)		
Installation Requirements/Conditions No.	umber of trenches 1	_(nepan)		
	act length of each trench		Trench Spacing:	C
,	enches shall be installed on co		Soil Cover: 6	inches
	aximum Trench Depth of:		(Maximum soil cover shall	
,	rench bottoms shall be level to) +/-1/4"	36" above the trench bot	tom)
	all directions)			
Pump Requirements:ft. TDH vs G	PM			inches below pipe
			Aggregate Depth:	
Conditions:			00 0 1	inches total
				Helico total
**If applicable: / understand the system type specified is a	different from the type specific	d on the application	I account the englishment	46:
mappicaute. I understand the system type specified is	unerent nom the type specinet	и он те аррисаціон.	r accept the specifications of	tnis permit.
Owner/Logal Penescentative transferre			D	
Owner/Legal Representative Signature: This Construction Authorization is subject to revocation if the site plan, plat, o			Date:	
inis construction authorization is subject to revocation in the site plan, plat, o	the intended use changes. The Construct	ion Authorization shall not b	e transferred when there is a change in o	
Construction Authorization is subject to compliance with the provision of the	ares and Kules for Sewage Treatment and	Disposal and to the condition	ons of this permit. SEE	ATTACHED SITE SKETCH
			1 1	
Authorized State Agent:	NAM RS	Date: _	10/21/08	
	Construction Authoriz	zation Expiration D:	ate: 10 21 13	
		2p 201011 20	····	

Harnett County Department of Public Health Site Sketch

	PROPERTY LOCATON: CREEKSVILLE CHURCH &	•
ISSUED TO: JS PROPERTIES	SUBDIVISION JAHLIN OAKS	LOT # 2~1
Authorized State Agent:	1-5 (OLIVER TOLKSOOD) Date: 10/21/09	-

