HTE# 08-5-20969 Harnett County Department of Public Health

25101

Improvement Permit

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: 5R1542 OID BULES Crook PD PROPERTY LOCATION: 5R1542 OID BULES Crook RA
SUBDIVISION SAND, Grove Site Improvements required prior to Construction Authorization Issuance: Type of Structure: SFD Proposed Wastewater System Type: 25% REDUCTION Systom Projected Daily Flow: 240 GPD Number of bedrooms: _____ Number of Occupants: ___ Z ____max Basement Yes 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 feet Permit valid for: Five years Permit conditions: ☐ No expiration Authorized State Agent Jones & Marhant Cores Date: 10-16-08 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: Kathy Snoth PROPERTY LOCATION: 5R 1542 OID BURES CLEEK RA SUBDIVISION SANDY GROVE LOT # 9 ☐ Expansion ☐ Repair Facility Type: Basement? Yes No Basement Fixtures?

Yes Type of Wastewater System** 25% REDUCTION MANITYEE (Initial) Wastewater Flow: 240 GPD (See note below, if applicable) 25% REDUCTION MANTERS (Repair) Number of trenches 3 **Installation Requirements/Conditions** Exact length of each trench 70 feet Trench Spacing: 9 Feet on Center Trenches shall be installed on contour at a Soil Cover: 6 inches Septic Tank Size 1000 gallons Pump Tank Size 1000 gallons 3/-1/2"sch40 VAIVES Maximum Trench Depth of: 26 7/8 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 Conditions: **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. SEE ATTACHED SITE SKETCH Date: 10-16 - 08 Construction Authorization Expiration Date: 10-16-13

HTE# 08	· S-	2090	9
---------	------	------	---

Permit # 25101

Harnett County Department of Public Health Site Sketch

ISSUED TO: Kathy Snoth SUBDIVISION Smaly Grove LOT # 9

Authorized State Agent panes & Manhan & Date: 10-16-08

