HTE# 08-5-21278

Harnett County Department of Public Health

25155

Improvement Permit

A building permit cannot be issued with only an Improvement Permit ISSUED TO: RAM DEVELOPMENT SUBDIVISION CAROLINA DAKS NEW 🔀 Site Improvements required prior to Construction Authorization Issuance: Type of Structure: ___ Proposed Wastewater System Type: Longenton PL Projected Daily Flow: ___ 480 Number of bedrooms: Number of Occupants: 8 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 100 feet Permit valid for: Five years Permit conditions: ☐ No expiration 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: ROM DEVELOPMENT. PROPERTY LOCATION: ____ SUBDIVISION CAROLINA ORCE LOT # 1) Facility Type: SFO (60'×46') ☐ Expansion ☐ Repair Basement? Yes No Basement Fixtures? Yes CONVENSIONAL (Initial) Wastewater Flow: 480 GPD Type of Wastewater System** (See note below, if applicable \square) LPR (Repair) Number of trenches 4 Installation Requirements/Conditions Septic Tank Size 1000 gallons Exact length of each trench 290 feet Trench Spacing: ______ Feet on Center Pump Tank Size _____ gallons Trenches shall be installed on contour at a Soil Cover: 28 inches Maximum Trench Depth of: 40 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 **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 this permit. SEE ATTACHED SITE SKETCH Authorized State Agent: Construction Authorization Expiration Date: 12/8/13

HTE#	08-5-21294
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Permit # <u>15)55</u>

Harnett County Department of Public Health Site Sketch

0 1	PROPERTY LOCATON:	
ISSUED TO: KAR DEVELORIGENT	SUBDIVISION CAROLINGA ORGS	LOT # \)
		201 //
Authorized State Agent:	25 (DLIVER TOLKSDOR) Date: 12 8 08	

