21301 HTE#<u>08-500-**282**80</u>

Hamett County Department of Public Health

25212

Improvement Permit

A I	ouilding permit cannot be issued with only an Improveme	nt Permit	2 (
- 0	PROPERTY LOCATION: Holly	springs Ch. F	20
ISSUED TO: Derry PArson	SUBDIVISION		LOT #
NEW REPAIR EXPANSION			Authorization Issuance: 10.01 Ae
Type of Structure: SFD - 53 x 68	4BR NOTE. Th	CTC APPEARS TO	be An old well (wellh
Proposed Wastewater System Type: 6 RAVEL		All Pont	r , .
Projected Daily Flow: 480 GPD	on propert	y - 5	Feptic system must
Number of bedrooms: Number of Occupa	ints: 8 max		
Basement □Yes ➤ No	De 100 K	on well or tre	Il must be properly about
	ed based on final location and elevations of facilities		
11 111 1 1 1 1	☐ Well Distance from well 100 feet	Permit valid	
Permit conditions: Meet onsite for	Final Layort Mointain	All Set VACKS	□ No expiration
STUB Out Plumbing Shallo			
	on old willfull howe or wel		1 1 1
Authorized State Agent::	Date: 12-3-38	THE RESERVE THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO I	SEE ATTACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guarant			
site is subject to revocation if the site plan, plat, or the intended use ch the Laws and Rules for Sewage Treatment and Disposal and to conditions		whership of the site. This permit is s	ubject to compliance with the provisions of
	5. m. p		
	Comptumetion Authorization		
	Construction Authorization		
	(Required for Building Permit)		
The construction and installation requirements of Rules .1950, .1952, .19	34, .1955, .1956, .1957, .1958. and .1959 are incorporated by referen	ces into this permit and shall be me	t. Systems shall be installed in accordance
with the attached system layout.			
ISSUED TO: Jan Parsons	PROPERTY LOCATION: H	11. (Panil C)	RI
133010 10. 0213	PROPERTY LOCATION: H-	rig strings co	LOT #
SED 58 118 1100	JODDINISION		LOT #
Facility Type: SFD-58 x 68-4 BA	The state of the s	ir	
Basement? 🗆 Yes 💆 No 🛮 Basement Fixt	ures? 🗌 Yes 🔀 No		103.
Type of Wastewater System**		(Initial) Wastewater	Flow: 485 GPD
(See note below, if applicable 🛛	, , , ,		
25% 14d	etien system (Repair)		
Installation Requirements/Conditions	Number of trenches		
Septic Tank Size 1000 gallons	Exact length of each trench	Trench Spacing:	Feet on Center
Pump Tank Size gallons	Trenches shall be installed on contour at a	Soil Cover:	inches
8	Maximum Trench Depth of: 18 inche	and the second s	
	(Trench bottoms shall be level to +/-1/4"	36" above the tren	
		JO ADOVE LITE LIER	cii bottoiii)
D D :	in all directions)		
Pump Requirements:ft. TDH vs	_ GPM		inches below pipe
u		Aggregate Depth:	Z inches above pipe
Conditions:			inches total
**If applicable: I understand the system type specified	is different from the type specified on the applicati	ion. I accept the specification	ons of this permit.
, ,, ,,			
Owner/Legal Representative Signature:		Date:	
Owner/Legal Representative Signature: This Construction Authorization is subject to revocation if the site plan, p	lat, or the intended use changes. The Construction Authorization shall	not be transferred when there is a ch	ange in ownership of the site. This
Construction Authorization is subject to compliance with the provisions of			SEE ATTACHED SITE SKETCH
	0		
Authorized State Agent:	(L)	12-7-0X	
Authorized State Agent.	Construction Authorization Expiration	Date: 11 7 201	2
1	Construction Authorization expiration	Date. II, J. (V.))

Harnett County Department of Public Health Site Sketch

IS	SUED TO:	ery Parsons	PROPERTY LOCATON: Holly Springs Ch. Road SUBDIVISION LOT #
Au	uthorized State Agen	nt: Jan WA	25 Date: 12-3-08 Pres 10.01 AC
<	- TO SR	- 1273	50 EAsement 413
and the	60.	On I	Rypaire 120
		18/2	
		Old	Meet on site for Final Layout
		will had 2	Maintain all set Backs All Parts of septic system must be los from existing well well house well may be properly abandoned but -
1		595	trup septic system within any ARCA MARKED BY MY ORANGE Flags
(21			Install 400 of gravel at 18" Deep.