HTE# 08-500-21356 R Harriett County Department of Public realth

25234

Improvement Permit

	A building permit cannot be issued with only an Improveme	nt Permit	
ISSUED TO: HOH Cont.	PROPERTY LOCATION: 1/25		
		DAKS LOT#	199
NEW A REPAIR □ EXPANSI Type of Structure: SFD - 38 x 47 - 3	ON L Site Improvements r	required prior to Construction Authorization Issuance:	•
Proposed Wastewater System Type: 25% (Led		ste That All under ground	
Projected Daily Flow: 360 GPD	action sylvan	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	i
Number of bedrooms: 3 Number of Occu	montry (must be 10' from my por	<u>-t</u>
Basement DYes X No		sytem	
	aired based on final location and elevations of facilities	37,20.4	
Type of Water Supply: Community Set Public	Well Distance from well 10 > fact	Parmit valid form	
Permit conditions: Meet Daste For	FINAL LAUDET MAINTAIN &	Permit valid for: Set Five year Blue Harris Valid for: No expire	
STUB Out Plumbing shallow	I At ground level or higher	Where Chouse	ation
	0 - 8		
Authorized State Agent:	Date: 01-25-09	09-14-09 47 GE ATTACHED CITE CHET	CH
The issuance of this permit by the Health Department in no way guard	intees the issuance of other permits. The permit holder is responsible for c	hacking with appropriate generals bulleting in the	
the Laws and Rules for Sewage Treatment and Disposal and to condition	Claires, the improvement Permit shall not be attected by a change in our	nership of the site. This permit is subject to compliance with the	provisions of
	of any period.		
	Construction Authorization		
	Construction Authorization		
The contraction and installation variables of 0.1. LOTA LOTA	(Required for Building Permit)		
with the attached system layout.	954, .1955, .1956, .1957, .1958. and .1959 are incorporated by reference	s into this permit and shall be met. Systems shall be installed in	accordance
, ,	. 4		
ISSUED TO: HOH Const.	PROPERTY LOCATI <u>on</u> : <u>//</u> 2		
\$60 00 00		OAK) LOT #/	194
Facility Type: SFD- 38x47 3BR	New Expansion Repair		
Basement? Yes No Basement Fix	tures? 🗌 Yes 🛮 🖊 No		
Type of Wastewater System** 25% Red	ection System	(Initial) Wastewater Flow: <u>36</u> 3	GPD
1)66 Note below it applicable MI)		(******) ***************************	_ 01 D
254. Rec	Auction System (Repair)		
Installation Requirements/Conditions	Number of trenches	_	
Septic Tank Size <u>1000</u> gallons	Exact length of each trench 300 feet	Trench Spacing: Feet on Center	
Pump Tank Size gallons	Trenches shall be installed on contour at a	Soil Cover: inches	
ű	Trenches shall be installed on contour at an X Maximum Trench Depth of: 8	(Maximum soil cover shall not exceed	
	(Trench bottoms shall be level to +/-1/4"	36" above the trench bottom)	
	in all directions)	30 above the trench bottom)	
Pump Requirements:ft. TDH vs		inches but	l
		Aggregate Depth: inches bel	
Conditions:			
		INC	hes total
**If applicable: / understand the system type specified	is different from the type specified on the application.		~
	is unterent from the type specified on the application.	. I accept the specifications of this permit.	
Owner/Legal Representative Signature:		_	
his Construction Authorization is subject to revocation if the site plan p	lat, or the intended use changes. The Construction Authorization shall not b	Vate:	
construction Authorization is subject to compliance with the provisions of	the Laws and Rules for Sewage Treatment and Disposal and to the conditi		
positions	and notes for seringe frequency and proposal and to the condition		
Authorized State Agent: () we will	A-RI	01-24-59 Penjal ate:01-29-2014 09-14-2044	الالا
delivited state Agent. The was	Date:	<u> </u>	′~
	Construction Authorization Expiration D	ate: 01.29 2014 09.14-2014	

Harnett County Department of Public Health Site Sketch

