HTE# 09.500-21653

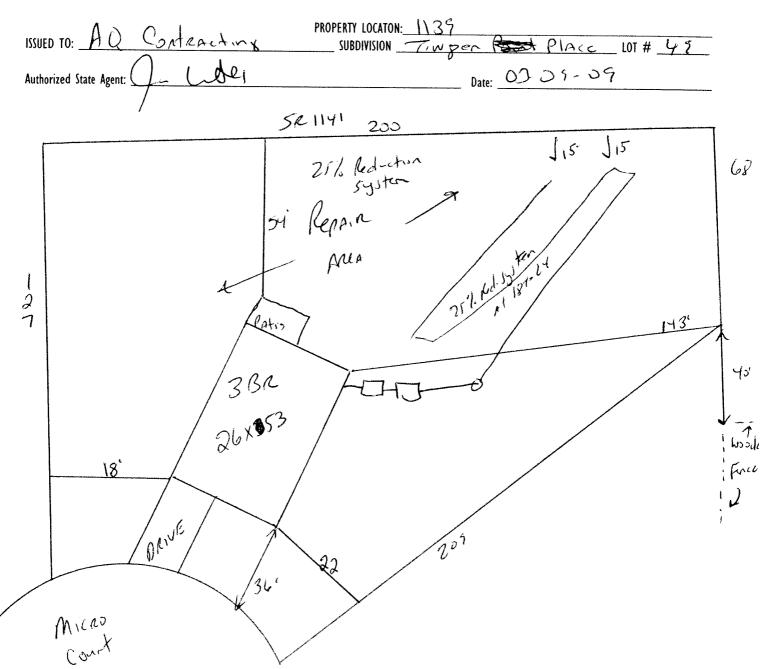
Harnett County Department of Public Health

25361

Improvement Permit

A A \		TION: 1139	. i Citilic	
ISSUED TO: AU Contracting		Tingen	Place	LOT # 49
NEW REPAIR □ EXPANSION □		()	quired prior to Construction	
Type of Structure: SFO - 35 x44 - 332			, ,	
Proposed Wastewater System Type: Purp t- 25-1- Pod-it	<u>01545.</u>			
Projected Daily Flow: 365 GPD	- 0	-		
Number of bedrooms: 3 Number of Occupants: 6	max			
Basement □Yes ★No				
Pump Required: □Yes □ No □ ★Aay be required based on final	al location and eleva	tions of facilities		
Type of Water Supply: Community Public Well Dis	stance from well	<u>د ا</u> feet	Permit valid for	or: 🗗 Five years
Permit conditions: Mect ansite for final Layot - maintain all set Backs No expiration				
STUB OUT Plumbing Shallow, A	Ft Ground	Level or h	igher Where	Shown And, A
1810 24 With Deathy Can be main				guind
Authorized State Agent::		03-39-3		EE ATTACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guarantees the issuance of c site is subject to revocation if the site plan, plat, or the intended use changes. The Improvem	other permits. The permit	holder is responsible for che	cking with appropriate governing be	odies in meeting their requirements. This
the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.	ent refinit shan not be	anected by a change in owne	ersnip of the site. This permit is sub	sject to compliance with the provisions of
Cons	truction Au	thorization		
	Required for Buildi			
The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .19 with the attached system layout.	757, .1958. and .1959 ar	e incorporated by references	into this permit and shall be met.	Systems shall be installed in accordance
,				
ISSUED TO: AQ Contracting	PROPERTY	LOCATION: 1/3	3	
	SUBDIVISIO	IN TINGER	Place	LOT # <u>49</u>
Facility Type: SFD-35x44-3BR Dev		-		
Basement? Yes No Basement Fixtures? Yes	⊠ No	·		
Type of Wastewater System** Punp to 25%. Redu	to- rut	m	(Initial) Wastowator F	Flow: 365 GPD
			(iiitiai) wastewatei i	1011 UID
(see note below, if applicable 52) Purp to 25% Abdue	ton Cal	(Ranair)		
Installation Requirements/Conditions Number of tre	nchar 1	_(nepair)		
	of each trench	<u> </u>	Trench Spacing: 9	Γ., .
	be installed on co	_	Soil Cover:	inches
,	•	say inches	(Maximum soil cover s	
· · · · · · · · · · · · · · · · · · ·	ns shall be level to	+/-1/4"	36" above the trench	ı bottom)
in all direction	15)			
Pump Requirements:ft. TDH vs GPM				inches below pipe
			Aggregate Depth:	inches above pipe
Conditions:			· · · · · · · · · · · · · · · · · · ·	inches total
**If applicable: I understand the system type specified is different from	n the type specifie	d on the application.	I accept the specification	s of this permit
., ,, ,,	77 7 7 7 7 7	77	a more and opcominations	r or this permit
Owner/Legal Representative Signature:			Date:	
Owner/Legal Representative Signature: This Construction Authorization is subject to revocation if the site plan, plat, or the intended u	ise changes. The Construct	ion Authorization shall not h	na transferred when there is a change	go in aumarchin of the cita. This
Construction Authorization is subject to compliance with the provisions of the Laws and Rules for	or Sewage Treatment and	Disposal and to the condition	ons of this permit	SEE ATTACHED SITE SKETCH
1 1.		und to the conditie	and or this permit.	AFF ULLUCIED HE SELECTION
Authorized State Agent:		n .	17-15-29	
Authorized State Agent: Date: 07-39-39 Construction Authorization Expiration Date: 07-39-394				
Con	struction Authori	zation Expiration D	ate: <u>- クラ- コラ- <i>入:</i></u>	214

Harnett County Department of Public Health Site Sketch



Meet onste for Final Layort Maintain All set Back, Zastall 180' 125% Adisys.

STUB Out Plumbing Stallow at ground level or higher where shown and, 1

18 to 24" Ditch Depth, can be maintained Then Pump may not be Required