HTE# 09-5-27651

Harnett County Department of Public Health

25314

Improvement Permit

A building permit cannot be issued with only an Imp	· 12 = -0 -
ISSUED TO: TASON PERCE CONST. PROPERTY LOCATION: HOC SUBDIVISION PERSIMO	MON HILLS LOT # 48
NEW X REPAIR EXPANSION Site Improve	ements required prior to Construction Authorization Issuance:
NEW REPAIR EXPANSION Site Improve	
Proposed Wastewater System Type: CONVENTIONAL	
Projected Daily Flow: 360 GPD	
Number of bedrooms: Number of Occupants: max	
Basement □Yes ☒ No Pump Required: □Yes □ No ズ May be required based on final location and elevations of facilit	6.00
Type of Water Supply: Community Public Well Distance from well 100	feet Permit valid for: Five years
Permit conditions:	No expiration
Authorized State Agent: Date: 4 17	
The issuance of this permit by the Health Department in no way guarantees the issuance of other permits. The permit holder is source is subject to revocation if the site plan, plat, or the intended use changes. The Improvement Permit shall not be affected by a change of the content of the site plan, plat, or the intended use changes. The Improvement Permit shall not be affected by a change of the content of the site plan, plat, or the intended use changes.	istible for checking with appropriate governing bodies in meeting their requirements. This age 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	and a second of the second of the provisions of
<u>Construction Authorizati</u>	<u>ion</u>
(Required for Building Permit)	
The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .1957, .1958, and .1959 are incorporated by with the attached system layout.	y references into this permit and shall be met. Systems shall be installed in accordance
ISSUED TO: JASON PRICE CONST. PROPERTY LOCATION:	Homese Ro
CHRONICION Pros	HOOVER KD SIMMON HILLS LOT#48
Facility Type: SFO (5C'x45') New Expansion	
Basement? Yes No Basement Fixtures? Yes No	nepail
Type of Wastewater System**	(Initial) Wastewater Flow: 360 GPD
(See note below, if applicable □)	(1111)
25% REDUCTION SYSTEM (Repair)	
Installation Requirements/Conditions Number of trenches 4	
Septic Tank Size 1000 gallons Exact length of each trench 60	_ feet
Pump Tank Size gallons Trenches shall be installed on contour at a	Soil Cover: 6 inches
Maximum Trench Depth of:	inches (Maximum soil cover shall not exceed
(Trench bottoms shall be level to $\pm -1/4$ "	36" above the trench bottom)
in all directions)	,
Pump Requirements:ft. TDH vs GPM	inches below pipe
	Aggregate Depth: inches below pipe inches above pipe
Conditions: PUMP MAY BE NECESSARY LE PROPER FALL CONJU	OT DE MAINTAINED IL inches total
REPAIR WILL PEQUIRE A FRENCH DOAW, DOAW MAY BE IN	WSTALLED WITH WITIAL SYSTEM.
CENTRAL HERETH DEST FOR DOWN SPECEFICATIONS.	
**If applicable: I understand the system type specified is different from the type specified on the applicable:	oplication. I accept the specifications of this permit.
Owner/Legal Representative Signature:	Date:
This Construction Authorization is subject to revocation if the site plan, plat, or the intended use changes. The Construction Authorization	
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
Authorized State Agent:	Date: 4 17 09
Construction Authorization Expir	ration Date: 417114

HTE#	00	5-3	185	١
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Permit # <u>25314</u>

Harnett County Department of Public Health Site Sketch

7.00	PROPERTY LOCATON: HOOVER RD	
ISSUED TO: JASON PRICE CONST	SUBDIVISION PERSIMMON HILLS	LOT # 148
Authorized State Agent:	es COLIVER TOLKSDOR Date: 4/17/09	
*DEAMING NTS		

