HE# 09-5-22074

Harnett County Department of Public Health

25483

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

PROPERTY LOCATION: NURSERY RO ISSUED TO: BLACKWELL HOMES INC SUBDIVISION WOOPSHIRE Site Improvements required prior to Construction Authorization Issuance: Type of Structure: SFOLGO'x54') Proposed Wastewater System Type: ConvEntionAL Projected Daily Flow: 440 GPD Number of Occupants: 8 max Number of bedrooms: Basement Tyes X No. Pump Required: TYes No ☐ May be required based on final location and elevations of facilities Type of Water Supply:
Community Public Well Distance from well LOO feet ☐ Five years
☐ Permit valid for: Permit conditions: ☐ No expiration Authorized State Agent::

Date: 5 21 09

SEE ATTACHED SITE SKETCH

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: BLACKWELL HOMES INC PROPERTY LOCATION: NURSERY RD SUBDIVISION WOODS 17 IRC LOT # 198 Facility Type: SFD (66×54) | New | Expansion | Repair Basement? Yes No Basement Fixtures? Yes No Basement? ☐ Yes ☑ No Basement Fixtures? ☐ Yes ☑ No

Type of Wastewater System** ☐ CONNENTION ☐ GPD

GPD (See note below, if applicable ConventioNAL Number of trenches 2 **Installation Requirements/Conditions** Exact length of each trench 100 Septic Tank Size 1000 gallons feet Trench Spacing: Feet on Center Pump Tank Size _____ gallons Trenches shall be installed on contour at a Soil Cover: 12-18 inches Maximum Trench Depth of: 24-30 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 Aggregate Depth: inches below pipe inches above pipe **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 pervisions of the Laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit. SEE ATTACHED SITE SKETCH Authorized State Agent: Construction Authorization Expiration Date: 5 2114

HTE# 09-5-32-074

Permit # 25483

Harnett County Department of Public Health Site Sketch

5	PROPERTY LOCATON: NURSERY Ro	
ISSUED TO: BLYCKMELL HORES INC	SUBDIVISION WOOSHIER	LOT # 198
Authorized State Agent:	ES (OLIVER TOLKSOORS) Date: 5 20 09	

