HTE# 09.5-22085 Harn	ett County Department of	Public Health	25284	
	Improvement Permit			
A	building permit cannot be issued with only an Impi	revement Permit		
ISSUED TO: Combarland Homer	SUBDIVISION LOUF	el Valley	101 # 7 ()	
	N 🗆 Site Improver	ments required prior to Construction Autho	rization Issuance:	
Type of Structure: SFD Proposed Wastewater System Type: pump to Co				
Projected Daily Flow: 7 (GPD	ivent renat			
Projected Daily Flow: GO GPD Number of bedrooms: Number of Occup	pants: 6 max			
Basement 🗆 Yes 🗖 No				
Pump Required: 🖬 Yes 🗌 No 🗌 May be requi	red based on final location and elevations of facilitie	es		
Type of Water Supply: 🗌 Community 🛛 Public	Well Distance from well	feet Permit valid for:	Five years	
Permit conditions:			No expiration	
	•			
Authorized State Agent: Augo Min.	~ Date: 6/300	2009		
The issuance of this permit by the Health Department in no way guarantees the issuance of other permit, The permit holder is responsible for cherking with proportion provided by the health Department in no way guarantees the issuance of other permit.				
site is subject to revocation if the site plan, plat, or the intended use cl the Laws and Rules for Sewage Treatment and Disposal and to condition	langes, the improvement Permit shall not be affected by a chang	ge in ownership of the site. This permit is subject to	compliance with the provisions of	
	of this permit.			
	Construction Authorization	N n		
		<u>) </u>		
The construction and installation requirements of Rules .1950, .1952, .19 with the attached system layout.	(<u>Required for Building Permit)</u> 54, .1955, .1956, .1957, .1958. and .1959 are incorporated by 1	references into this permit and shall be met. Systems	shall be installed in accordance	
ISSUED TO: Combarland Home	-	27		
		27 rel Valley		
Facility Type:SFD	SUBDIVISION <u>Law</u>	relValley	LOT # <u>70</u>	
	New L Expansion L	Kepair		
Type of Wastewater System** Pump	ures?] Yes] No - convention	/1 (.1 l) (kt	21.0	
(See note below it applicable ())		(Initial) Wastewater Flow:	<u>GPD</u> GPD	
pump to	Number of trenches (Repair)			
Installation Requirements/Conditions	Number of trenches 3			
Septic Tank Size 1000 gallons	F .	feet Trench Spacing: 9	Fred on Conton	
Pump Tank Size / 00 0 gallons	Trenches shall be installed on contour at a	feet Trench Spacing: <u>9</u> Soil Cover: <u>8</u> i	reet on Center	
		inches (Maximum soil cover shall r		
	(Trench bottoms shall be level to $+/-1/4$ "	36" above the trench bott		
	in all directions)	so above the trench bott	unij	
Pump Requirements:ft. TDH vs	GPM	6	inches below pipe	
		Aggregate Denth: 2	inches above pipe	
Conditions: Draintield to be locat	ed in easement tor lot 71	O. Druin /	2 inches total	
Conditions: Drainfield to be locat liner to be run on contour	r			

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**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: Date:				
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 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 Super Music R.S. Date: 6/30/2009 Construction Authorization Expiration Date: (130/2014				



