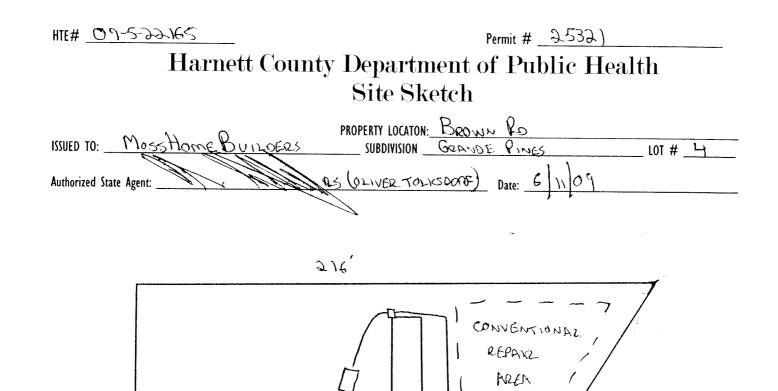
HTE#09-5-22165

25321

## Improvement Permit

	Ab	uilding permit can	not be issued wit PROPERTY LOCA	h only an Impi	rovement	Permit	
ISSUED TO: MOSS Ho	me BUILO	DERS		GODNO	E D	<u></u>	LOT # 나
NEW 🔀 REPAIR 🗖	FXPANSION	Π				uired prior to Construction	
Type of Structure: SEOCS	n'x33')			one improver		and provide construction i	actionzation issuance.
Proposed Wastewater System Type: _	CONVENTIO	NAL	_				
Projected Daily Flow: 360	GPD	~					
Number of bedrooms:	Number of Occupa	nts: <u>6</u>	_max				
Basement 🗆 Yes 🔀 No							
Pump Required: 🗆 Yes 🛛 No	May be require	ed based on final lo	ocation and eleva	tions of faciliti	es		
Type of Water Supply: 🗌 Commun	ity 🔀 Public	🗆 Well 🛛 Distan	ce from well 🔢	00	feet	Permit valid f	or: Kive years
Permit conditions:							No expiration
	1AH -						
	All in the second se						
Authorized State Agent::	1. 11/1	1 23	Date:	6/11/00	]	SE	E ATTACHED SITE SKETCH
The issuance of this permit by the Health Dep site is subject to revocation if the site plan, p	partment in no way guarante plat, or the intended use cha	es the issuance of other nges. The Improvement	r permits. The permit Permit shall not be	holder is responsi affected by a chan	ble for che ge in owne	cking with appropriate governing be rship of the site. This permit is sub	dies in meeting their requirements. This ject to compliance with the provisions of
the Laws and Rules for Sewage Treatment and	Disposal and to conditions	of this permit			0	,	for to comprisince with the provisions of
······		Comotor		(h			
		Constr	uction Au	thorizatio	<u>on</u>		
The construction and installation requirements with the attached system layout.	of Rules .1950, .1952, .195	<u>(Req</u> 4, .1955, .1956, .1957,	uired for Buildi .1958. and .1959 ar	<u>ng Permit)</u> e incorporated by	references	into this permit and shall be met.	Systems shall be installed in accordance
	0						
ISSUED TO: Moss Ho	DUE DUILO	E-2-5		LOCATION: _	B	ROYN RD	
			SUBDIVISIO	IN <u>Ga</u>	ANDE	E PINES	LOT # 4
Facility Type: SFD(57	<u>*335")</u>	_ 🔀 New	🗌 Expans	ion 🗆	Repair		
Basement? 🗆 Yes 🛛 🔍 No	Basement Fixtu	res? 🔲 Yes	XNO		•		
Type of Wastewater System**	CONVENT	ONAL.				(Initial) Wastewater F	low: ろんの GPD
(See note below, if applicable )	1						
, ,	CONVEN	JONAL-		_(Repair)			
Installation Requirements/Condition		Number of trench		-(			
		Exact length of e		20	feet	Trench Spacing:	Faat on Contor
		Trenches shall be			icci	Soil Cover: 12	
	0	Maximum Trench		-	inchor	(Maximum soil cover s	
		(Trench bottoms	•		menes	•	
		•	shall be level u	) =/-1/4		36" above the trench	Dottom)
Pump Requirementer		in all directions)				/	• • • • • •
Pump Requirements:	ונ. וטא אג	Grn					inches below pipe
Conditions:						Aggregate Depth:	<u>→</u> inches above pipe <u>→→</u> inches total

**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	s permit. SEE ATTACHED SITE SKETCH					
Authorized State Agent: Date: Construction Authorization Expiration Date:	6/11/09					



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QR-2U

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2-30

57'x33'

40

