HTE# 09-5-22200

Harnett County Department of Public nealth

25499

Improvement Permit

A building permit cannot be issued with only an Improvement Permit		
Commanda Sons Down	PROPERTY LOCATION: CYORESS CHURCH KS	
ISSUED TO: CHARLES , OKIE FOR	2010 SUBDIVISION ARCHIE CAMERON	LOT #
NEW REPAIR DEXPANSION Type of Structure:	N Site Improvements required prior to Construction Authorize	ation Issuance:
Type of Structure: 500 00 ×50)		
Proposed Wastewater System Type: Convention	JAL	
Projected Daily Flow: 480 GPD		
Number of bedrooms: Number of Occupa	ants: 8 max	
Basement □Yes 🔀 No		
	red based on final location and elevations of facilities	
Type of Water Supply: Community Public	☐ Well Distance from well _\○○ feet Permit valid for:	Five years
Permit conditions:		☐ No expiration
THE AS		
Authorized State Agent::	Date: C 16 09 SEE ATTA	CHED SITE SKETCH
Authorized State Agent:: Date: C 16 0 0 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		
	hanges. The Improvement Permit shall not be affected by a change in ownership of the site. This permit is subject to c	ompliance with the provisions of
the Laws and Rules for Sewage Treatment and Disposal and to conditions	; of this permit	
0		
	Construction Authorization	
(Required for Building Permit)		
The construction and installation requirements of Rules 1950, 1952, 199	254, 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.	54, 11554, 1154, 1154, 1156, and 1157 are medipolated by reference into this period and some of their species	man be instance in accordance
1.03		
ISSUED TO: CHARLES & OKE ACKROYO PROPERTY LOCATION: CYPRESS CHURCH RO SUBDIVISION ARCHIE CAMERON LOT # 2		
Facility Type: SFD(60'×50')	SUBDIVISION ARCHIE CAMERON	tot #
Facility Type: SED(60 ×50)	New □ Expansion □ Repair	
	tures? 🗆 Yes 🔀 No	
	(Initial) Wastewater Flow:	480 GPD
(See note below, if applicable)	(initial) Wastewater Flow.	di b
LP?	(0)	
THE CONTROL WAS AND THE CONTROL OF T	Number of transfer 5	
Installation Requirements/Conditions	Number of frenches	
Septic Tank Size 1000 gallons	Exact length of each trench 80 feet Trench Spacing:	Feet on Center
Pump Tank Size 1000 gallons	Trenches shall be installed on contour at a Soil Cover: 34 in	nches
(IF NEEDED)	Maximum Trench Depth of: 36 inches (Maximum soil cover shall n	ot exceed
	(Trench bottoms shall be level to +/-1/4" 36" above the trench bottoms	om)
	in all directions)	,
Pump Requirements:ft. TDH vs		inches below pipe
Tulip Requirementsit. 1011 43	_ UII	inches below pipe
	Aggregate Depth:	inches above pipe
Conditions:		a 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 available if the vible of	plat, or the intended use changes. The Construction Authorization shall not be transferred when there is a change in or	wasship 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.		
Authorized State Agent: Construction Authorization Expiration Date: 6 16 14 Construction Authorization Expiration Date: 6 16 14		
·	Construction Authorization Expiration Date: 6/16/14	
	construction expiration bate.	

Harnett County Department of Public Health Site Sketch

Authorized State Agent:

PROPERTY LOCATON: CYPRESS CHURCH RO

SUBDIVISION ARCHIE CAMERON LOT # 2

Authorized State Agent:

Date: 6/16/09

