HTE# 09-5-22531

Harnest County Department of Public mealth

25589

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

	PROPERTY LOCATION: 1902/14
ISSUED TO: CUMBERLAND HOMES INC	SUBDIVISION MIRE BRANCH LOT # 69
NEW REPAIR □ EXPANSION □	Site Improvements required prior to Construction Authorization Issuance:
Type of Structure: SFD (50°×35°)	
Proposed Wastewater System Type: Conversional	
Projected Daily Flow: 360 GPD	
Number of bedrooms: 3 Number of Occupants: 6	max
Basement □Yes ☒ No	
	nal location and elevations of facilities
Type of Water Supply: Community Public Well D	
Permit conditions:	□ No expiration
AHA ID	
Authorized State Agent::	
	other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This ment Permit shall not be affected by a change in ownership of the site. This permit is subject to compliance with the provisions of
the tams and notes for sewage frequirent and orsposal and to conditions of this permit.	
Con	struction Authorization
E Y T	(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: CUMBERLAND HOMES INC	PROPERTY LOCATION: NEDTW
	SUBDIVISION MIRE BRANCH LOT # 69
Facility Type: SEO(50×35) X N	ew Expansion Repair
Basement? Yes No Basement Fixtures? Yes	
	(Initial) Wastewater Flow: 365 GPD
<i>'</i>	(IIIIIIai) Wastewater Flow 560 GPD
(See note below, if applicable □)	
CONVENTIONAL	(Repair)
	trenches
Septic Tank Size 1000 gallons Exact length	of each trench 100 feet Trench Spacing: Feet on Center
Pump Tank Size gallons Trenches sha	all be installed on contour at a Soil Cover: 6-12 inches
Maximum Tr	rench Depth of: 18-24 inches (Maximum soil cover shall not exceed
	toms shall be level to +/-1/4" 36" above the trench bottom)
in all direct	######################################
Pump Requirements:ft. TDH vs GPM	inches below pipe
rump nequirementsnt. 1bit 45 of 11	
C Fd	Aggregate Depth: inches above pipe
Conditions:	inches total
**If applicable: / understand the system type specified is different to	from the type specified on the application. I accept the specifications of this permit.
Owner/Legal Representative Signature:	Date:
	d 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 Rul	es for Sewage Treatment and Disposal and to the conditions of this permit. SEE ATTACHED SITE SKETCH
Males III	
Authorized State Agent:	COLIVER TOLKSDOP Date: 8 20 09
	Sonstruction Authorization Expiration Date: 2 2014
	2 201.

HTE#	09-5-22531	
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Permit # 25589

Harnett County Department of Public Health Site Sketch

Authorized State Agent: PROPERTY LOCATON: NC27W

SUBDIVISION MIRE BRANCH LOT # 69

Date: 8 20 09

