HTE#<u>09-5-22719</u>

Harnett County Department of Public Health

25693

Improvement Permit

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: MICRO TOWER RO SUBDIVISION PATIONS POINT I STANCIL BUILDERS INC NEW 🔀 REPAIR [Site Improvements required prior to Construction Authorization Issuance: Type of Structure: SFD (60 1240) Proposed Wastewater System Type: 25% REDUCTION STOREM Projected Daily Flow: Number of bedrooms: Number of Occupants: Basement Yes Pump Required: □Yes Ø No ☐ May be required based on final location and elevations of facilities Type of Water Supply:

Community

Public

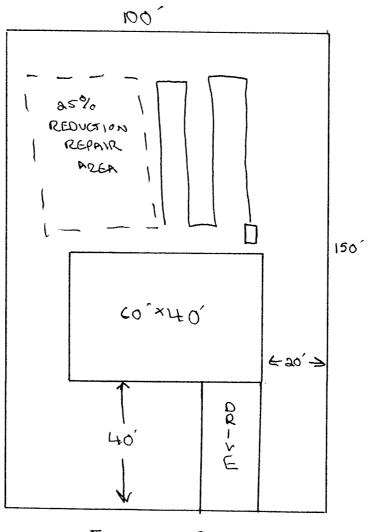
Well Distance from well 100 feet Five years Permit valid for: Permit conditions: ☐ No expiration The issuance of this permit by the Health Department in no way guarantees the issuance of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. 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: STANCIL BUILDERS INC PROPERTY LOCATION: MICROTORIER RO SUBDIVISION PATTONS POINT II Facility Type: SFD(60 ×40) ☐ Expansion ☐ Repair Basement? Yes No Basement Fixtures? Yes 25% REDUCTION SYSTEM (Initial) Wastewater Flow: 181 GPD Type of Wastewater System** (See note below, if applicable X) 25% REDUCTION SYSTEM Installation Requirements/Conditions Number of trenches 1 Septic Tank Size 1000 gallons feet Trench Spacing: _____ Feet on Center Exact length of each trench 150 Pump Tank Size _____ gallons Trenches shall be installed on contour at a Soil Cover: 12-24 Maximum Trench Depth of: 34-36 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 Conditions: WATER LINE MUST BE 10 FROM SEPTIC SYSTEM. NO UTILITIES Aggregate Depth: ______ inches above pipe MAY ENCROPER OF INITIAL OR REPAIR ADEA **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 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: _ Construction Authorization Expiration Date: 10/6/14

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Permit # <u>25693</u>

Harnett County Department of Public Health Site Sketch

	PROPERTY LOCATON: Micaolones Ro	
ISSUED TO: STANCIL BUILDERS INC	SUBDIVISION Pangus POLYT I	LOT # 1/8 /
Authorized State Agent:	REHS OLIVER TOLKSDORD Date: 10 609	



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