HTE# 09-5-22728

## Harnett County Department of Public Health

25620

Improvement Permit

DRO	PERTY LOCATION: J. L. IIII Marks Ld.	
ISSUED TO: Kenneth Commings SUE		~ ~ ~
NEW ☐ REPAIR ☐ , EXPANSION ☐		lot # <u>72</u>
Type of Structure: SFD 46 X54'	Site Improvements required prior to Construction Authorization Issu	ance:
Proposed Wastewater System Type: Conventional		
Projected Daily Flow: 360 GPD		
Number of bedrooms: Number of Occupants: max  Basement Yes No		
Pump Required:   No May be required based on final location.	-	-
Type of Water Supply: ☐ Community ☐ Public ☐ Well Distance from Permit conditions:	m well feet Permit valid for: 🗗 Fiv	e years
remit conditions.	N <sub>0</sub>	expiration
Authorized State Agent: Musica R.S.	2/2/2005	
	Date: 9/18/2009 SEE ATTACHED SITE	SKETCH
The issuance of this permit 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 changes. The Improvement Permit the laws and Pulsa for Survey I.	is. The permit holder is responsible for checking with appropriate governing bodies in meeting their	requirements. This
the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.	shall not be anected by a change in ownership of the site. This permit is subject to comphance w	ith the provisions of
Construct	an Authorization	
Construct	<u>on Authorization</u>	
(Required	for Building Permit)	
The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .1957, .1958, with the attached system layout.	and .1959 are incorporated by references into this permit and shall be met. Systems shall be insta	lled in accordance
ISSUED TO: Kerneth Cummings	DROPERTY LOCATION COLUMN	
	PROPERTY LOCATION: SZIIII	
- · · · · · · · · · · · · · · · · · · ·	SUBDIVISION Asherord LOT	「# <u>フス</u>
	] Expansion 🗌 Repair	
Basement?  Yes No Basement Fixtures? Yes	No .	
Type of Wastewater System**	(Initial) Wastewater Flow: $\mathcal{F} G$	GPD
(See note below, if applicable [])	(minus) Wasterfater How.	GI D
25% leduction	(Repair)	
Installation Requirements/Conditions Number of trenches		
8	1 0	enter
Pump Tank Size gallons Trenches shall be insta	inches .	
Maximum Trench Dept	n ok 36-20 inches (Maximum soil cover shall not exceed	
(Trench bottoms shall	be level to $\pm \frac{1}{4}$ " 36" above the trench bottom)	
in all directions)	,	
Pump Requirements:ft. TDH vs GPM	G inch	ac halaw nina
		es below pipe
Conditions: Start ditcher at 36 inche trun	Aggregate Depth: 2 inc	hes above pipe
10 11 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	to doinches	inches total
	system for KEPAIR Areas	
Water liner most be 10th from an	y part at the selfic system	
**If applicable: I understand the system type specified is different from the type	pe specified on the application. I accept the specifications of this permit	
, ,, ,	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 charge is a life of the	.ia. T6::
Construction Authorization is subject to compliance with the provisions of the Laws and Rules for Sewage	reatment and Disposal and to the conditions of this permit.  SEE ATTACHED	
production details	SEC ATTACHED	SHE SKEICH
Authorized Case Americal		
Authorized State Agenty Luga Music Minimum	Date: 9//8/2009	
Construction	Authorization Expiration Date: 8/11/2014	

## Harnett County Department of Public Health Site Sketch

<i>y</i> //	PROPERTY LOCATON:	RILL Marks	
ISSUED TO: Kerneth Comm	subdivision As	heterd	LOT # 72
Authorized State Agent:	Mc Louis, R.S.	Date: 9/18	2009

