HTE# 09-5-23063

## Harnett County Department of Public Health

25760

## **Improvement Permit**

A building permit can	not be issued with	only an Improvement	t Permit	
MCUED TO CC \		DN: WILL L		
		CAROLINA		LOT # <u>\\</u>
NEW REPAIR EXPANSION Type of Structure:	2	ite Improvements re	quired prior to Construction Auth	orization Issuance:
Proposed Wastewater System Type: Company on AL	-			
Projected Daily Flow: 480 GPD				
Number of bedrooms: 4 Number of Occupants: 8	max –			
Basement Yes No				
Pump Required: □Yes No □ May be required based on final 1	– location and elevatio	ns of facilities		
Type of Water Supply: 🗌 Community 💢 Public 🔲 Well Distar	nce from well 10	o feet	Permit valid for:	Five years
Permit conditions:				☐ No expiration
The same				
The state of the s		110		
Authorized State Agent:  The issuance of this permit by the Health Department in an army programme of the permit by the Health Department in an army programme of the permit by the Health Department in an army programme.	Date:	11/5/09	SEE A	TTACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guarantees the issuance of othe site is subject to revocation if the site plan, plat, or the intended use changes. The Improvement the laws and Bules for Source Technology.	er permits. The permit ho Permit shall not be affe	lder is respionsible for che cted by a change in own	ecking with appropriate governing bodies	in meeting their requirements. This
the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.	The same same sor be une	cica by a change in onth	ersmp of the site. This permit is subject	to comburative with the highizious of
Constr	uction Auth	orization		
	quired for Building			
The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .1957,	.1958. and 1959 are in	refinity	into this permit and shall be met Susten	ms shall be installed in accordance
with the attached system layout.	are in	responding by reservinces	mito tins permit and shan be met. System	ins small be installed in accordance
ISSUED TO: G.S. Langoon Inc	DRADERTY L		١. ٥.	
1330ED 10			LL LUCAS RO	
Facility Type: 5FO(53^x55) New			IA DAKS	LOT # <u>4 \</u>
	Expansion	ı 🗆 Repair		
Basement?  Yes No Basement Fixtures? Yes				Long
Type of Wastewater System** Conventional			(Initial) Wastewater Flow	GPD GPD
(See note below, if applicable )				
	(	Kepair)		
Installation Requirements/Conditions Number of trend				
* · · · · ·	each trench <u>51</u>		Trench Spacing:	
•	installed on conti		Soil Cover: 12-24	inches
	Depth of: 24		(Maximum soil cover shall	
•	shall be level to -	+/- /4"	36" above the trench bo	ttom)
in all directions)			,	
Pump Requirements:ft. TDH vs GPM			<u>\delta</u>	inches below pipe
Conditions: WATER LINE MUST BE 10'F UTILITIES MAY ENCROPICH ON INIT		C	Aggregate Depth: 2	inches below pipe inches above pipe
Conditions: WATER LINE MUST DE 10 F	con SEPT	10 DYSTEM	1. No	inches total
UTILITIES THY ENCOPPING ON MIT	ALOR CE	spain Ana	EA	
**If applicable: I understand the system type specified is different from t	the type specified o	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 c	hanges. The Construction	Authorization shall not b	e transferred when there is a change in	ownership of the site. This
Construction Authorization is subject to compliance with the pearsions of the Laws and Rules for S	ewage Treatment and Dis	posal and to the condition	ns of this permit. SEE	ATTACHED SITE SKETCH
Authorized State Agent:	REHS	Date:	11/2/09	
7 7	uction Authorizat			

## Harnett County Department of Public Health Site Sketch

PROPERTY LOCATON: WILL LUCAS RO	
ISSUED TO: C.S. LANGOON INC SUBDIVISION CAROLINA DAKS	LOT # 4)
Authorized State Agent: PENS (OLIVERTOLKSDORG) Date: 11/2/09	
ORAMINE NTS	

