HTE# 09-5-23099

## Harnett County Department of Public Health

25755

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

2	PROPERTY LO	CATION: MICOOTOWER RD	
ISSUED TO: D. WALSH CONSTRUCT		TINGEN PLACE	FOT # 178
NEW X REPAIR I EXPANSION Type of Structure: SFO しゅう スペン)		Site Improvements required prior to Construction	
Proposed Wastewater System Turn C			
Proposed Wastewater System Type: Convention  Projected Daily Flow: 360 GPD	<u>N</u> L		
Number of bedrooms:  Number of Occupant	6		
Basement 🗆 Yes 🔀 No	s:max		
• •	based on final location and ele-	vations of facilities	
Type of Water Supply:  Community Public	Well Distance from well	valions of facilities  1000 feet Permit valid fo	\\ \tag{r}_1 \\ \tag{r}_2 \\ \tag{r}_3
Permit conditions:		remit valid it	or: Five years   No expiration
			□ no expiration
Authorized State Agent::			
The issuance of this permit by the Health Denartment in no way guarantees	RENS Date:	10/32/0d RE	E ATTACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guarantees site is subject to revocation if the site plan, plat, or the intended use chang the Laws and Rules for Sewage Treatment and Disposal and to conditions of	cs. The inibrovenient refmir (nail not be	nt notder is responsible for checking with appropriate governing bo e affected by a change in ownership of the site. This permit is sub	dies in meeting their requirements. This ject to compliance with the provisions of
	Construction Au	ıthorization	
	(Required for Build		
The construction and installation requirements of Rules .1950, .1952, .1954, with the attached system Javour	nequired for build the property of the propert	are incorporated by references into this permit and shall be most.	Section of the East Control of
with the attached system layout.		the met. 3	ystems snam be installed in accordance
ISSUED TO: D. WALSH COMSTONES I	PROPERT	Y LOCATION: MICROTONER RO	
	CHRDIVICE	ON TINGEN PLACE	LOT # _ <del>'\</del> %
Facility Type: 550 (40' x45)		sion   Repair	LUI #
Basement?		перан	
	IAL	(Initial) Wastewater Fl	~~~ 3c ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
(See note below, if applicable □)		(mitial) Wastewater 11	ow: <u>&gt;60</u> GPD
CONVENTIO	JAC	(Repair)	
Installation Requirements/Conditions N	ımber of trenches \	(,	
	act length of each trench 15	feet Trench Spacing: 9	Foot on Conton
	enches shall be installed on c		
· ·	aximum Trench Depth of: 12		
	rench bottoms shall be level t		
	all directions)	50 above the trench	portonii)
	PM	C	Southern Laboratory
		Aggregate Death:	inches below pipe
Conditions: WATER LINE MUST BEID	FROM SEPTIC STO	Aggregate Depth:	inches above pipe
MAY ENCOURCH ON JUITIAL OR	REPAIR ROGAS	orall Charles	inches total
**If applicable: I understand the system type specified is c	lifferent from the type specifie	ed on the application. I accept the specifications	of this permit.
Owner/Legal Representative Signature:		, ,	,
		Date:	
his Construction Authorization is subject to revocation if the site plan, plat, or	the intended use changes. The Construc	tion Authorization shall not be transferred when there is a change	
onstruction Authorization is subject to compliance with the provisions of the L	aws and Kules for Sewage Treatment and	Usposal and to the conditions of this permit.	EE ATTACHED SITE SKETCH
uthorized State Assets	0000	1 1	
authorized State Agent:	J BEHS	Date: 1027 09	
	Construction Authori	zation Expiration Date: 10 27 14	-

HTE#	09	-5-	230	opc	١
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Permit # 25755

## Harnett County Department of Public Health Site Sketch

PROPERTY LOCATON: MICROTONER RO	
ISSUED TO: D. WALSH CONSTRUCTION SUBDIVISION TINGEN PLACE LOT	# 48
Authorized State Agent: Date: 10/27/09	

