HTE#10-5-23558 Ha	C rnett County Department of Public He	alth	25881
	Improvement Permit		
(James Wiggs) A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: BUFFALOE LAKE RD ISSUED TO: WYAN CONSTRUCTION SUBDIVISION CAMERON PINES LOT # 18			
ISSUED TO: WYORK CLASSE	PROPERTY LOCATION: BUFFALOE LAX	EKO	10
	NSION SUBDIVISION CANCER Proces	r to Construction Author	LOT # <u>\8</u>
		r to construction Author	ization issuance:
Proposed Wastewater System Type: 25% Reo	UCTION SYSTEM		
Projected Daily Flow: <u>360</u> GPD Number of bedrooms: <u> </u>			
Basement $\Box$ Yes No	Occupants: <u> </u>		
Pump Required: 🗆 Yes 🗆 No 🕅 May be r	required based on final location and elevations of facilities		
Type of Water Supply:  Community  Permit conditions:	c 🗌 Well Distance from well <u>100</u> feet	Permit valid for:	Five years
			·
Authorized State Agent::	all eens Date: 21010	CEE ATT	
Additionized state Agent: Date: Date: Date: Date: SEE ATTACHED SITE SKETCH 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		
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: WINN CONSTRUCT	ON PROPERTY LOCATION: BUFFALOE	LAKE RO	
Facility Type: _5F0 (385~50)		<u>es</u>	LOT # <u>\ 8</u>
Facility Type: $320$ $35$ $50$ Basement? $\Box$ Yes $\Box$ No Basement	New 🔲 Expansion 🗌 Repair		
Type of Wastewater System**	Fixtures? □ Yes X No -EOUCKIUN System (Initia	1) 147	
(See note below, if applicable $\Box$ )	(Initiation (Initiation (Initiation))	al) Wastewater Flow:	<u>360</u> GPD
Pumetos	2.5% REDUCTION SUSTEM(Repair)		
Installation Requirements/Conditions	Number of trenches 5		
Septic Tank Size $1000$ gallons	Exact length of each trench <u>60</u> feet Trench S	ipacing:	Feet on Center
Pump Tank Size gallons	Irenches shall be installed on contour at a Soil Cove	er: 6 j	nches
	Maximum Trench Depth of: <u>18</u> inches (Maxir	num soil cover shall n	ot exceed
		above the trench botte	om)
Pump Requirements:ft. TDH vs	in all directions) GPM		• • • • •
		In D. J.	inches below pipe inches above pipe
Conditions: WATER LINE MUST F	BE 10' FROM SEPTIC SYSTEM. THIS PA	ie Depin	incres above pipe
BASED ON PROPOSAL FRO.	Aggrega BE 10' FROM SEPTIC SYSTEM. THIS PE M APPLICANTS SOIL CENSULTANT	<u></u>	inches total
**If applicable: / understand the system type specifi	fied is different from the type specified on the application. I accept	the specifications of th	his permit.
Owner/Legal Representative Signature:		Date:	
This Construction Authorization is subject to revocation if the site pla	nn, plat, or the intended use changes. The Construction Authorization shall not be transferred	when there is a change in ow	mership of the site. This
construction Authorization is subject to compliance with the provision	as of the laws and Rules for Sewage Treatment and Disposal and to the conditions of this pe	rmit. SEE A	ATTACHED SITE SKETCH
Authorized State Agent:	the seaso fills	, ,	
Authorized State Agent: Date: Date: Date: Date:			
	construction Authorization Expiration Date: 2	NOIS	

e ar far ear da bar ear da haile da haile an an

na 60 mili Bel Banas Canas an Ingina

ana dirina co

