HTE# 10-5-23722 Hari	nett County Department of Public Health	25825
	Improvement Permit	
A building permit cannot be issued with only an Improvement Permit		
ISSUED TO: AQ Contracting	PROPERTY LOCATION: <u>Tingen</u> Rd. SUBDIVISION <u>Tingen</u> Place ON □ Site Improvements required prior to Construction Ai	LOT # _ 7
NEW C REPAIR C EXPANSI	ON □ Site Improvements required prior to Construction A	
Type of Structure: (FI) 42X \mathcal{R}		inonzation issuance.
Proposed Wastewater System Type: <u>COAVENT</u> Projected Daily Flow: <u>360</u> GPD	<u>und</u>	
Projected Daily Flow: 560 GPD	(
Number of bedrooms: Number of Occu Basement □Yes ☑ No	ipants:max	
	uired based on final location and elevations of facilities	
Type of Water Supply: Community Public	Well Distance from well feet Permit valid for	: EFive years
Parmit conditions:		□ No expiration
<i>J</i>		
At the second se	C. Perla plustanta	
Authorized State Agent:	La REAS Date: 2/19/2010 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		
(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: HQ Contracting	PROPERTY LOCATION: Tingen Kol.	
	PROPERTY LOCATION: Tingen Rol. SUBDIVISION Tingen Place New Expansion Repair	LOT # <u>7</u>
Facility Type:	🗹 New 🖂 Expansion 🖂 Repair	
	ktures? 🗆 Yes 🔲 No	21.
, , <u> </u>	entional (Initial) Wastewater Flo	ow: <u>260 </u> GPD
(See note below, if applicable □)	ent-inel (Repair)	
Installation Requirements/Conditions	Number of trenches(Repair)	
Septic Tank Size Q O gallons		F
Pump Tank Size gallons	Exact length of each trench $\underline{30}$ feet Trench Spacing: $\underline{7}$ Trenches shall be installed on contour at a Soil Cover: $\underline{72}$	
sunons	Maximum Trench Depth of: $24 - 18$ inches (Maximum soil cover sh	inches
	(Trench bottoms shall be level to $+/-1/4$ " 36" above the trench	
	in all directions)	bottom
Pump Requirements:ft. TDH vs	,	<u>6</u> inches below pipe
	Annue mate Dan the	2
Conditions: Start ditches at	2718 inch + run to 24: nches Aggregate Depth:	12 inches total
Water liner must be at	least 10ft from any part of seatic	system
No Utilities Allowed	in the system for repair areas	7
**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:	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 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.		
Authorized State Agent:	Way LEH Date: 2/19/2010	
Construction Authorization Expiration Date: 2/19/20/0		

4.) Server 6

