25895

Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: Hwy27 SUBDIVISION TINGEN POINTE ISSUED TO: AMERICAN HOMESMITH LOT # W) REPAIR 🖂 Site Improvements required prior to Construction Authorization Issuance: Type of Structure: _ > FD (42x50) Proposed Wastewater System Type: 25% REDUCTION SYSTEM Projected Daily Flow: 360 Number of bedrooms: ________ Number of Occupants: 6 max Basement TYes Pump Required:

No May be required based on final location and elevations of facilities Type of Water Supply:

Community

Public

Well Distance from well

feet Five years Permit valid for: Permit conditions: _ ☐ No expiration WWW SEHS 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 ISSUED TO: AMERICAN HOMESMATH PROPERTY LOCATION: Hwy 27 SUBDIVISION TINGEN POINTE Facility Type: SED (42×50) New Expansion Repair 25% REDUCTION SYSTEM (Initial) Wastewater Flow: 360 GPD Type of Wastewater System** (See note below, if applicable \(\sigma\) 25% REDUCTION SYSTEM (Repair) Number of trenches 3 Installation Requirements/Conditions Exact length of each trench 75 feet Trench Spacing: 9 Feet on Center Soli Cover: 6 inches Septic Tank Size 1000 gallons Pump Tank Size _____ gallons Maximum Trench Depth of: ____18_____ inches (Maximum soil cover shall not exceed (Trench bottoms shall be level to +/-1/4" 36" above the trench bottom) in all directions) Pump Requirements: _____ft. TDH vs. ____ _____ inches below pipe Conditions: WATER LINE MUST. BE 10' FROM SERTIC SYSTEM. THIS PERMIT inches above pipe inches total BASED ON PROPOSAL FROM REPLICANTS SOIL CONSULTANT **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: 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. SEE ATTACHED SITE SKETCH Authorized State Agent:

Construction Authorization Expiration Date: 226 15

HTE#	10-5-23746

Permit # 25895

Harnett County Department of Public Health Site Sketch

PROPERTY LOCATON: Hwy 27 HomESM 15H LOT # _\\\ ISSUED TO: American SUBDIVISION TIMEEN POINTE COENS (OLIVER TOLKSDORF) Date: 2 36/10 Authorized State Agent:

