HTE# 10-5-23747

Harnett County Department of Public Health

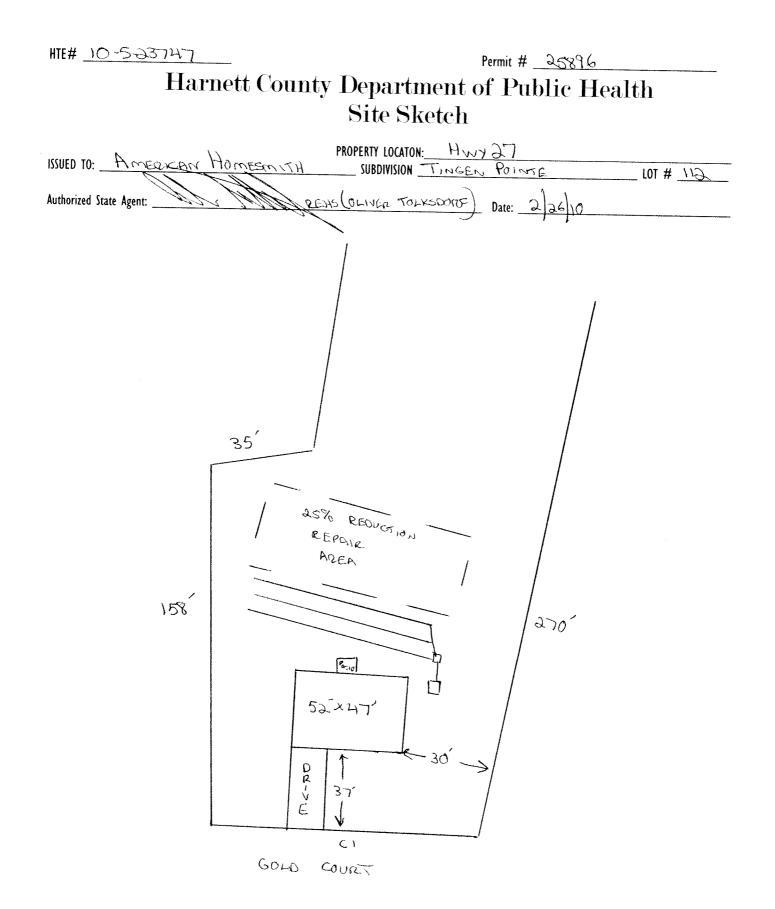
25896

Improvement Permit

	A building permit cannot be issued with	h only an Improveme	nt Permit	
ISSUED TO: PANERICAN HOMESMY	PROPERTY LOCA	TION: Hwy 2	2	
	Sopprision	LINGEN PC	DINTE	LOT # NO
NEW & REPAIR L EXPANSI Type of Structure: SFD (ちょンソーア)	UN LI	Site Improvements r	equired prior to Construction Authority	prization Issuance:
Proposed Wastewater System Type: 25% REDU				
Projected Daily Flow: GPD	GION JYS IEM			
	ipants: <u> </u>			
Basement 🗆 Yes 🖉 No	ipalitsmax			
Pump Required: 🗆 Yes 🗆 No 🔀 May be requ	uired based on final location and aloue			
Type of Water Supply: Community Public	Well Distance from well V	nons of facilities	B 1 11 1	Service and the service of the servi
Permit conditions:			Permit valid for:	Five years
1470 22				No expiration
Authorized State Agent:	DEHS Date:	2/26/10		
The issuance of this permit by the Health Department in no way guara	antees the issuance of other permits. The permit	holder is refransible for al	and the second device of the second	TACHED SITE SKETCH
, and the print print, of the interface use	Changes, the inpluventent refinit shan not no a	ffected by a change in own	tership of the site. This permit is subject to	or meeting their requirements. This of compliance with the provisions of
the Laws and Rules for Sewage Treatment and Disposal and to condition	ns of this permit.		, <u>, , , , , , , , , , , , , , , , , , </u>	in the provisions of
	<u>Construction</u> Aut	horization		
	(Required for Buildir			
The construction and installation requirements of Rules .1950, .1952, .1 with the attached system layout	1954, .1955, .1956, .1957, .1958, and .1959 are	incorporated by references	into this permit and shall be met furter	n alkali ka Susa Bud Susa d
with the attached system layout.		interpreter by reference.	into and permit and shan be met. system	s shall be instaned in accordance
ISSUED TO: ADDEDUCE WITH				
ISSUED TO: AMERICAN HOMESMY	PROPERTY	LOCATION: H_{\sim}	76 1	
Facility Type: SFD(52(x47))	SUBDIVISIO	1 LINGEN -	POINTE	LOT # 112
racing type. JES Dang 1	📈 New 🗀 Expansio	on 🗌 Repair		
Basement? 🗆 Yes 🔀 No Basement Fix	tures? 🗆 Yes 🔀 No			
Type of Wastewater System** 25% RED	UCTION SYSTEM		(Initial) Wastewater Flow:	360 GPD
isee note below. If applicable $[X_i]$				
25% REDU	GION SYSTEM	(Repair)		
Installation Requirements/Conditions	Number of trenches 3	. ,		
Septic Tank Size <u>VCCC</u> gallons	Exact length of each trench $\underline{\neg}$ $\underline{\neg}$ Trenches shall be installed on con	5 feet	Trench Spacing:	Foot on Contor
Pump Tank Size gallons	Trenches shall be installed on cor	tour at a	Soil Cover: 6	inches
· · · · ·	Maximum Trench Depth of:Y	S inchar		
	(Trench bottoms shall be level to		(Maximum soil cover shall i	
	in all directions)	• / • • / •	36" above the trench bott	om)
Pump Requirements:ft. TDH vs	GPM			
				inches below pipe
Conditions: WASEQ - LINE MUSE BE 11	SE SE S	0	Aggregate Depth:	inches above pipe
Bosto O-1 Pagarai C	J HOM SEPTIC SYST	Em. HIS F	ERMIT	inches total
Conditions: WATER LINE MUST BE LI BASED ON PROPOSAL FRO	M TYPLICANIS DOI	L LONSULT	1/17	
**If applicable: / understand the system type specified	is different from the type specified	on the application.	I accept the specifications of t	his permit.
			-	•
Owner/Legal Representative Signature:			Data	

	Vale.	
This Construction Authorization is subject to revocation if the site plan, plat, or the intended use changes. The Construction Authorizat		
and the state plan, plat, or the interiored use changes. The Construction Authorizat	ion shall not be transferred when there is a ch	lange 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	1 10 A A A A	-
to the cars and rules for sewage treatment and Disposal and	to the conditions of this permit.	SEE ATTACHED SITE SKETCH
Authorized State America	1 1	
Authorized State Agent:	Date: 2 240	
	Date. a a lo	

Construction Authorization Expiration Date: 226 15



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