25967

HTE#10-5-24189

Harnett county Department of Public Health

Improvement Permit

A building permit cannot be issued with only an Improvement Permit	
PROPERTY LOCATION: Marks Rd.	
ISSUED TO: Wynn Construction SUBDIVISION Cooper Forms LOT#	
NEW REPAIR . EXPANSION . Site Improvements required prior to Construction Authorization Issuance:	
Type of Structure: SFD 47 X51	
Proposed Wastewater System Type: Conventional	
Projected Daily Flow: GPD	
Number of bedrooms: Number of Occupants: max	
Basement	
Pump Required: Yes No May be required based on final location and elevations of facilities	
Type of Water Supply: Community Public Well Distance from well feet Permit valid for: Five years	
Permit conditions: No expirat	on
A NO POLIC	
Authorized State Agent: Day Date: 4/25/200 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 requirement in the permit holder is responsible for checking with appropriate governing bodies in meeting their requirement.	
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 pre- the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.	MIZIOUZ OI
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Construction Authorization	
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 ac with the attached system layout.	cordance
man to be a fine of the fine o	
Facility Type: 5FD New Expansion Repair	
SUBDIVISION Cooper terms LOT#	
Facility Type: SFD New Expansion Repair	
Basement? Yes No Basement Fixtures? Yes No	
Type of Wastewater System** Conventional (Initial) Wastewater Flow: 360	GPD
(See note below, if applicable □)	
Otrashallow Conventional (Repair)	
Installation Requirements/Conditions Number of trenches 4	
Septic Tank Size 100 gallons Exact length of each trench 40 feet Trench Spacing: 9 Feet on Center	
Pump Tank Size gallons Trenches shall be installed on contour at a Soil Cover: 6/2 inches	
Maximum Trench Depth of: 18-24 inches (Maximum soil cover shall not exceed	
(Trench bottoms shall be level to +/-1/4" 3 (2010) 36" above the trench bottom) in all directions)	
in all directions) 5-7/3/200	
Pump Requirements:ft. TDH vs GPM inches bel	ow pipe
Conditions: Run drain lines on contour. No Utilities Allowed in 12 inches at 15 ten for Rejair areas. All water lines must be 10 feet from	ove pipe nes total
Ilsten for leigh areas. All water lines must be 10 feet from	ics total
A / F Colin Col	
any part of septic system	
**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. The	iis
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.	KETCH
Authorized State Agent: Date: 4/28/20/6	
Construction Authorization Expiration Date: 4/28/2015	

Harnett County Department of Public Health Site Sketch

