HTE# 10-5-24227

## Harnett County Department of Public Health

26032

Improvement Permit

A building permit cannot be issued with only an improvement Permit
ISSUED TO: MARK & NAMES PROPERTY LOCATION: CLARK ROAD  LOT #
NEW REPAIR EXPANSION Site Improvements required prior to Construction Authorization Issuance:  Type of Structure: SFD(65*66)
Type of structure: SPDICS 60)
Proposed Wastewater System Type: Pump To ULTRASHALLOW CONVENTIONAL
Projected Daily Flow: 360 GPD
Number of bedrooms: 3 Number of Occupants: 6 max
Basement
Pump Required: XYes    No    May be required based on final location and elevations of facilities
Type of Water Supply:   Community Public   Well Distance from well   Five years
Permit conditions:
THE STATE OF THE S
Authorized State Agent:  DENS  Date: 5 3 10  SEE ATTACHED SITE SKETCH
SEE MINCHED SHE SHELLI
The issuance of this permit by the Health Department in no way guarantees the manance of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. The 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
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: MARK MARKER PROPERTY LOCATION: CLARK RD
CUDDIVICION
Facility Type: SCD (CSXCO) New Expansion Repair
Basement?  Yes No Basement Fixtures? Yes No
Type of Wastewater System** Pump To ULICASHIFLION CONVENTIONAL of MANATE (Initial) Wastewater Flow: 360 GPD
(See note below, if applicable [])
Prone To ULTRASHQUON CON, (Repair)
Installation Requirements/Conditions Number of trenches 3
Sentia Teach Gray A GG Constitutions Front least to Control Co
Septic Tank Size 1000 gallons Exact length of each trench 100 feet Trench Spacing: Feet on Center
Pump Tank Size 1000 gallons Trenches shall be installed on contour at a Soil Cover: 6 inches
Maximum Trench Depth of: (12-124) 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: 13.5 ft. TDH vs. 30 GPM
Aggregate Denth: 2 inches above ni
Conditions: Minimum OF GOF COVER OVER DRAWESED. WATER LINE MUST BE 10 17 inches to
Pump Requirements: 13.5 ft. TDH vs. 30 GPM  Aggregate Depth: 2 inches below pip  Conditions: M.M. MAYER COVER OVER DRAWFIED. WATER Line MUTT BE 10 12 inches tot  From SERTIC SYSTEM. MANATER SPECS = 2 PRESSURE HEAD, 2"SCH HOPIRE, H 3"SCH VALVES
FROM SERTIC SYSTEM. MANATEL SPECS = 2 PRESSURE HEAD, 2"SCH HO PIPE, H "3"SCH VALVE
**If
**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 provision of the Laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit.  SEE ATTACHED SITE SKETCH
Authorized State Agent: Date: 5 3 0  Construction Authorization Expiration Date: 5 3 15
Construction Authorization Funivation Date 5 3 15
CONSTRUCTION AUTHORIZATION EXPIRATION DATE: 3 3 12

HTE#	10-5	-24227

Permit # \_ 26032

## Harnett County Department of Public Health Site Sketch

ISSUED TO: MARK & MANCH PARKER SUBDIVISION LOT #_	- •
Authorized State Agent: Date: 5 3 10	
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E Pump TO	
CONVENTIONAL CONVENTIONAL	
Daine 65'x60'	

HTE# 10-5-24227

## Harnett County Department of Public Health

Improvement Permit

^	PROPERTY LOCATIO			
ISSUED TO: MARK & NANCY PARK	SUBDIVISION	UN. C-AZK ROAD	LOT #	
		Site Improvements required prior to Construction Auth		
NEW REPAIR EXPANSION  Type of Structure: SFD(65*60)	N Ц	site improvements required prior to construction Auth	OTIZATION ISSUANCE.	
Proposed Wastewater System Type: Pump To U				
	THEASPALLON CONVENTIO			
Projected Daily Flow: 360 GPD				
	ants: max			
Basement Yes No		and the site is		
Pump Required: XYes	red based on final location and elevation	> feet Permit valid for:	Tivo years	
	Well Distance from well	Permit valid for:	Five years	
Permit conditions:			☐ No expiration	
Authorized State Agents	DEHS Date: E	\$   3 \ 10 SEE A	TTACHED SITE SKETCH	
Authorized State Agent::  The issuance of this permit by the Health Department in no way guara				
site is subject to revocation if the site plan, plat, or the intended use				
the Laws and Rules for Sewage Treatment and Disposal and to condition		, , , , , , , , , , , , , , , , , , , ,		
	Construction Aut	horization		
Th	(Required for Buildin	•	shall be installed in accordance	
The construction and installation requirements of Rules .1950, .1952, .1954, with the attached system layout.			ems snall de installed in accordance	
ISSUED TO: MARK MANCY PAR	PROPERTY	LOCATION: CLARK RD		
- ( )	SUBDIVISION	N	LOT #	
Facility Type: SED (CSXCO)	New 🗆 Expansion	on 🗆 Repair		
Basement? Yes No Basement Fix	tures? Tyes No	1		
Type of Wastewater System** Pump To U	TRASHPLLON CONVENTIO	NAL W MANATEE (Initial) Wastewater Flow	r: 340 GPD	
(See note below, if applicable $\square$ )				
Prone To U	LTRASHALLON CON.	(Repair)		
Installation Requirements/Conditions	Number of trenches 4	-()		
Septic Tank Size 1000 gallons	Exact length of each trench	feet Trench Spacing:	Feet on Center	
	Trenches shall be installed on con	ntour at a Soil Cover: 6	_ inches	
Pump Tank Size 1000 gallons	4			
	Maximum Trench Depth of:			
	(Trench bottoms shall be level to	+/-1/4" 36" above the trench b	ottom)	
.2.5	in all directions)	,		
Pump Requirements: 13.5 ft. TDH vs. 30	GPM	_6	inches below pipe	
		Aggregate Depth:	inches above pipe	
Conditions: MINIMUM OF G"OF COVER FROM SERTIC SYSTEM. MAN	OVER DRAWFIED. WATE	ER LINE MUST BE 10	inches total	
FROM SEPTIC SYSTEM. MAN	ATEL SPECS = 2'PA	LESSURE HEAD &"SCH 40 PIPE,	4 3"SON VALVES	
**If applicable: / understand the system type specifie	d is different from the type specified	d on the application. I accept the specifications of	of this permit.	
	// /	,, ,	A Control of the Cont	
Owner/Legal Representative Signature:		Date:		
This Construction Authorization is subject to revocation if the site plan,				
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.	EE ATTACHED SITE SKETCH	
		1.1		
Authorized State Agent: Date: 5 3 0				
Construction Authorization Expiration Date: 5 3 15				
	COUSTINATION MUTHOLI	Lation Expiration Date.		

## Harnett County Department of Public Health Site Sketch

ISSUED TO: Maga	PROPERTY LOCATON: CLARE RD  SUBDIVISION	LOT #
Authorized State Agent:	RENS LOLIVER TOLKSDOOD Date: 5 3 10	
O SUNING	50° CLARX PO 200 200 505 5 5 5 5 5 5 5 5 5 5 5 5 5 5	
	E ASE PUMP TO	
	CO NVENTIONAL	
	DRINE 65'X60'	