

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

ISSUED TO: CUMBERLAND HOMES
PROPERTY LOCATION: NC27W
SUBDIVISION: MIRE BRANCH LOT # 45
Type of Structure: SFD (38'x45')
Proposed Wastewater System Type: 25% REDUCTION
Projected Daily Flow: 360 GPD
Number of bedrooms: 3 Number of Occupants: 6 max
Basement: No
Pump Required: No
Type of Water Supply: Public
Distance from well: 100 feet
Permit valid for: Five years

Authorized State Agent: [Signature] RENS Date: 5/26/10 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: CUMBERLAND HOMES
PROPERTY LOCATION: NC27W
SUBDIVISION: MIRE BRANCH LOT # 45
Facility Type: SFD (38'x45')
Basement? No
Type of Wastewater System: 25% REDUCTION SYSTEM (Initial) Wastewater Flow: 360 GPD
(See note below, if applicable) 25% REDUCTION SYSTEM (Repair)

Installation Requirements/Conditions
Septic Tank Size: 1000 gallons
Pump Tank Size: _____ gallons
Number of trenches: 3
Exact length of each trench: 100 feet
Trench Spacing: 9 Feet on Center
Soil Cover: 6 inches minimum
Maximum Trench Depth: 12 inches
(Trench bottoms shall be level to +/- 1/4" in all directions)
(Maximum soil cover shall not exceed 36" above the trench bottom)

Pump Requirements: _____ ft. TDH vs. _____ GPM
Aggregate Depth: _____ inches below pipe
_____ inches above pipe
_____ inches total

Conditions: MINIMUM OF 6" OF COVER NEEDED OVER DRAINFIELD. WATER LINE MUST BE 10' FROM SEPTIC SYSTEM. NO UTILITIES MAY ENCRoACH ON INITIAL OR REPAIR AREA.

**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. SEE ATTACHED SITE SKETCH

Authorized State Agent: [Signature] RENS Date: 5/26/10
Construction Authorization Expiration Date: 5/26/15

HTE# 10-5-24397

Permit # 26106

Harnett County Department of Public Health Site Sketch

PROPERTY LOCATOR: NC27W

ISSUED TO: CUMBERLAND HOMES SUBDIVISION MIZE BRANCH LOT # 45

Authorized State Agent: ~~[Signature]~~ PENS (OLIVER TOLKSOORF) Date: 5/26/10

