Harnett County Department of Public Health

HTE# 10-5-24488

26219

	m	p	r	0	Y	e	Į	ĩ	1	e	r	11	P	e	r	r	n	I	t	
-		-			_		-	-	-	_	-	_	 						_	

A building permit cannot				
	PROPERTY LOCA	TION: POMDER	DOG KO	
ISSUED TO: CUMBERLAND HOMES	SUBDIVISION	CAROLINA	SEDONIS	LOT # 70
NEW REPAIR C EXPANSION C		Site Improvements req	uired prior to Construction Author	ization Issuance:
Type of Structure: SED (48×62)			•	
Proposed Wastewater System Type: CUNNENTIONAL				
Projected Daily Flow: GPD				
Number of bedrooms: <u>3</u> Number of Occupants: <u>6</u> m	ax			
Basement 🗆 Yes 🔍 No				
Pump Required: 🗆 Yes 🛛 🔀 No 👘 🗆 May be required based on final loca	ation and eleva	tions of facilities		
Type of Water Supply: 🗆 Community 🛛 Rublic 🔲 Well Distance			Permit valid for:	🗙 Five years
Permit conditions:				□ No expiration
			· · · · · · · · · · · · · · · · · · ·	
		, 1	······································	· · · · · · · · · · · · · · · · · · ·
Authorized State Agent:	Date:	72910	SEE ATT	ACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guarantees the issuance of other p	ermits. The permit			
ite is subject to revocation if the site plan, plat, or the intended use changes. The Improvement Pe	ermit shall not be	affected by a change in owne	rship of the site. This permit is subject to	compliance with the provisions of
he Laws and Bules for Sewage Treatment and Disnosal and to conditions of this permit				

Construction Authorization

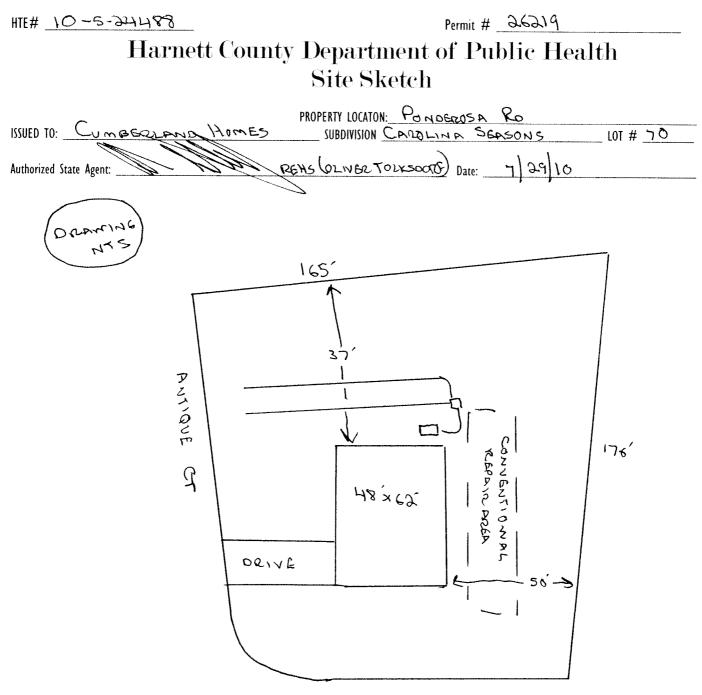
(Required for Building Permit)

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 HOME	PROPERTY LOCATION:	DEROSA RD
	SUBDIVISION CAROLIN	UN SEASONS LOT # 70
Facility Type: <u>SFD(48'×67)</u>	🕅 New 🔲 Expansion 🔲 Repair	
Basement? 🗆 Yes 🛛 No 🛛 Basement Fixth	N	- /
Type of Wastewater System** CONVENT	TIONAL	(Initial) Wastewater Flow: <u>360</u> GPD
(See note below, if applicable 🗆)		
CONVENT		
Installation Requirements/Conditions	Number of trenches	
Septic Tank Size <u>1000</u> gallons	Exact length of each trench $\neg \leq$ feet	Trench Spacing: Feet on Center
Pump Tank Size gallons	Trenches shall be installed on contour at a	Soil Cover: 12-24 inches
	Maximum Trench Depth of: $24 - 36$ inches	(Maximum soil cover shall not exceed
	(Trench bottoms shall be level to +/-1/4"	36" above the trench bottom)
	in all directions)	c ·
Pump Requirements:ft. TDH vs	_ GPM	inches below pipe
and the second sec		Aggregate Depth: inches above pipe
Conditions:		<u> </u>

WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM ANY PART OF SEPTIC SYSTEM OR REPAIR AREA. NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD 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 Authori	zation shall not be transferred when there is a change in ownership of the site. This					
Construction Authorization is subject to compliance with the protisions of the Laws and Rules for Sewage Treatment and Disposal a	nd to the conditions of this permit. SEE ATTACHED SITE SKETCH					
Authorized State Agent: Construction Authorization E	Date:					



GREEN LINKS DOR