26177

HTE# 10-5-24681

## Harnett County Department of Public Health

Improvement Permit

| - 0 0                                                                                                                                                | DRUDEDTY LUCAT                                                 | only an Improvement                                      | nt Permit                                   |                                     |
|------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|----------------------------------------------------------|---------------------------------------------|-------------------------------------|
| ISSUED TO Jaron Price Contration PROPERTY LOCATION: Ponderora Rd.  NEW ET BERNET LOCATION: Ponderora Rd.  SUBDIVISION Carolina Searon LOT # 35       |                                                                |                                                          |                                             |                                     |
| REPAIR L. C. EXPANSION   Gits Improvements would be                                                                                                  |                                                                |                                                          |                                             | LOT # <u>35</u>                     |
| Type of Structure: SFD 53 X4C                                                                                                                        |                                                                | one improvements i                                       | equired prior to construction Auti          | iorization issuance:                |
| Proposed Wastewater System Type: 25% Redu                                                                                                            | ction System                                                   |                                                          |                                             |                                     |
| Projected Daily Flow: GPD                                                                                                                            | <b>t</b>                                                       |                                                          |                                             |                                     |
| Number of bedrooms: 3 Number of Occup                                                                                                                | ants: max                                                      |                                                          | :                                           |                                     |
| Basement Yes No                                                                                                                                      |                                                                |                                                          |                                             |                                     |
| Pump Required: □Yes □ No □ May be requi                                                                                                              | red based on final location and elevat                         | ions of facilities                                       |                                             |                                     |
| Type of Water Supply:  Community Public                                                                                                              | ☐ Well Distance from well                                      | feet                                                     | Permit valid for:                           | Five years                          |
| Permit conditions:                                                                                                                                   |                                                                |                                                          |                                             | ☐ No expiration                     |
|                                                                                                                                                      |                                                                |                                                          |                                             |                                     |
| Authorized State Agent:                                                                                                                              | - RES Date:                                                    | - /2-/                                                   |                                             |                                     |
| the issuance of this permit by the Realth Department in no way guarant                                                                               | took the icessance of other named. The                         | 7/20/201                                                 | JEL A                                       | TTACHED SITE SKETCH                 |
| site is subject to revocation if the site plan, plat, or the intended use che the Laws and Rules for Sewage Treatment and Disposal and to conditions | anges. The Improvement Permit shall not be af                  | iolder is responsible for ch<br>ected by a change in own | ecking with appropriate governing bodies    | in meeting their requirements. This |
| the Laws and Rules for Sewage Treatment and Disposal and to conditions                                                                               | of this permit                                                 | votes by a change in own                                 | eramp or the site. This permit is subject t | o compliance with the provisions of |
|                                                                                                                                                      |                                                                |                                                          |                                             |                                     |
|                                                                                                                                                      | Construction Aut                                               | horization                                               |                                             |                                     |
|                                                                                                                                                      |                                                                |                                                          |                                             |                                     |
| The construction and installation requirements of Rules .1950, .1952, .195 with the attached system layout.                                          | Required for Building [4, 1955, 1956, 1957, 1958, and 1959 are | promorated by references                                 | inea alticumente con la la la la constante  |                                     |
| with the attached system layout.                                                                                                                     | and 11757 are                                                  | nicorporated by references                               | into this permit and shall be met. System   | is shall be installed in accordance |
| ISSUED TO: Joseph Price Conr<br>Facility Type: SFD                                                                                                   | 1 /                                                            | D                                                        | 1 01                                        |                                     |
| moto 10. O SOUR TAREE COND                                                                                                                           | Muchica PROPERTY L                                             | OCATION: _ T an                                          | derosa kd.                                  |                                     |
| Facility Types CFA                                                                                                                                   | SUBDIVISION                                                    | -Carolin                                                 | a Seasour                                   | LOT # 35                            |
|                                                                                                                                                      | anpunisio                                                      | n 🗌 Repair                                               |                                             |                                     |
| Basement?  Yes No Basement Fixtu                                                                                                                     | ,                                                              |                                                          |                                             |                                     |
| Type of Wastewater System** 257-le                                                                                                                   | duction System                                                 |                                                          | (Initial) Wastewater Flow:                  | 360 GPD                             |
| (See note below, if applicable [])                                                                                                                   |                                                                |                                                          | , , , , , , , , , , , , , , , , , , , ,     | S GIV                               |
| W/o Ked                                                                                                                                              | uction System (                                                | Repair)                                                  |                                             |                                     |
| Installation Kequirements/Conditions                                                                                                                 | Number of trenches3                                            |                                                          |                                             |                                     |
| Septic Tank Size 1000 gallons                                                                                                                        | Exact length of each trench 4                                  | C feet                                                   | Trench Spacing: 9                           | Faat on Contor                      |
| Pump Tank Size gallons                                                                                                                               | Trenches shall be installed on cont                            | our at a                                                 | 4 11 4                                      | inches                              |
|                                                                                                                                                      | Maximum Trench Depth of: 24                                    |                                                          | (Maximum soil cover shall                   |                                     |
|                                                                                                                                                      | (Trench bottoms shall be level to                              |                                                          |                                             |                                     |
|                                                                                                                                                      | in all directions)                                             | • /-1/7                                                  | 36" above the trench bot                    | iom)                                |
| Pump Requirements:ft. TDH vs                                                                                                                         | GPM                                                            |                                                          |                                             |                                     |
|                                                                                                                                                      |                                                                |                                                          |                                             | inches below pipe                   |
| Conditions: No utiliter allower<br>All water lines must be at                                                                                        | ed in sucken to                                                | - 40 -                                                   | Aggregate Depth:                            | inches above pipe                   |
| All water liver must be at                                                                                                                           | 10-6-11                                                        | of the se                                                | tan orec.                                   | inches total                        |
| 11.00                                                                                                                                                | TOOL OF LOTE!                                                  | 0/t. two                                                 | cany part of                                | septie system                       |
| *If applicable: / understand the water to "C. I."                                                                                                    | I'M                                                            |                                                          | •                                           |                                     |
| *If applicable: / understand the system type specified is                                                                                            | different from the type specified i                            | on the application.                                      | I accept the specifications of t            | his permit.                         |
|                                                                                                                                                      |                                                                |                                                          |                                             | ,                                   |
| wner/Legal Representative Signature:                                                                                                                 |                                                                |                                                          | Date:                                       |                                     |
| onstruction 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 ov    | nership of the site. This           |
| onstruction Authorization is subject to compliance with the provisions of the                                                                        | Laws and Rules for Sewage Treatment and Dis-                   | posal and to the condition                               |                                             | ATTACHED SITE SKETCH                |
| 11.10                                                                                                                                                | Perio                                                          | 222 (11)                                                 | / /                                         |                                     |
| uthorized State Agent:                                                                                                                               | - LEH)                                                         | Date:                                                    | 7/20/2010                                   |                                     |
|                                                                                                                                                      | Construction Authorizati                                       |                                                          | 7/2/2-15                                    |                                     |
|                                                                                                                                                      | ACTION TACHONIZALI                                             | vii Expiration Da                                        | ic. 1/16/2011                               |                                     |

## Harnett County Department of Public Health Site Sketch