26176

HTE# 10-5-24682

## Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only a		0 ,	
ISSUED TO: Jason Price Construction SUBDIVISION Con	Lordonora k	۵.	
NEW REPAIR . EXPANSION . Site Im	olive Deare	<b>V</b>	LOT # 36
Type of Structure: FD 40 X 61	provements required pr	ior to Construction Author	zation Issuance:
Proposed Wastewater System Type: 25% Leduction System		***************************************	
Projected Daily Flow: 600 GPD			
Number of Dedrooms: S Number of Occupants: /O max	ATTITUTE OF THE PARTY OF THE PA		
Basement Yes No			
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	foot	Permit valid for:	- Vogen
Permit conditions:		remit valid for.	☐ Five years ☐ No expiration
			in expiration
	/ /		
Authorized State Agents June 19 Loin EH Date: 7/x	20/2010	SEE ATTA	ACHED 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	annioniste governing bodies in	menting 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 the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.	a change in ownership of th	e site. This permit is subject to	compliance with the provisions of
and takes for serage readment and bisposal and to conditions of this permit.			
	•		
<u>Construction Authorize</u>	<u>ration</u>		
(Required for Building Perm	nit)		
The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .1957, .1958, and .1959 are incorpora with the attached system layout.	ted by references into this p		
ISSUED TO: Jaron Price Construction PROPERTY LOCATION SUBDIVISION C	IN: Ladero.	ra Let.	
SUBDIVISION C	مه اندر رو	easons.	LOT # 26
Facility Type:	Repair		
Basement? Yes No Basement Fixtures? Yes No			
Type of Wastewater System** 25% Reduction System	(Ini	tial) Wastewater Flow: _	600 GPD
(See note below, if applicable [])	· · · · · · · · · · · · · · · · · · ·	many tradectrates from: _	GI D
25 % leder in System (Repair	١		
Installation Requirements/Conditions Number of trenches 4	,		
Septic Tank Size 1250 gallons Exact length of each trench 50	feet Trench	Spacing: 9	Feet on Center
Pump Tank Size gallons		spacing.	
Maximum Trench Depth of: 18 32			ches
•		imum soil cover shall n	
(Trench bottoms shall be level to +/-1/4	4" 36"	' above the trench botto	m)
in all directions)			
Pump Requirements:ft. TDH vs GPM			inches below pipe
CE A Filter N 11 mil 1	Aggreg	ate Depth:	inches above pipe
Conditions: No atilities allowed in system for 1	efair over	<u> </u>	inches total
I'll water I mer must be at least 1974. from	any part	sit partic	system
			•
**If applicable: I understand the system type specified is different from the type specified on the	application. I accept	t the specifications of th	is permit.
	,,	one openinearing of the	o 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	zation shall not be transferre	d when there is a change in own	archin of the cite. This
Construction Authorization is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal ar	nd to the conditions of this i		TTACHED SITE SKETCH
		1 /	THE SHE SHEET
Authorized State Agept: McLic LEHS	Natas 😽 /	20/200	
Construction Authorization E	Date: 7/	X 1 x 0/ 0	
Construction Authorization E	xniration Date:	12012015	

## Harnett County Department of Public Health Site Sketch

~ n	Cartretian SUBDIVISION Corolin	rorald.	
ISSUED TO: U over Trice	Contraction SUBDIVISION Corolin	ia Secrais	LOT # SC
Authorized State Agent:	Mesing Rells	Date: 7/20/20/0	

