HTE# 10-5-24932

Harnett County Department of Public Health

Improvement Permit

26250

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: Hwy27W ISSUED TO: WYMN CONSTRUCTION INC SUBDIVISION TINGER POINTE NEW REPAIR DEXPANSION DEXPANSION DESCRIPTION DESCRIPTI Site Improvements required prior to Construction Authorization Issuance: Proposed Wastewater System Type: Pump To 25% REDUCTION Projected Daily Flow: 340 GPD Number of bedrooms: 3 Number of Occupants: 6 max Basement Yes No Pump Required: Myes

No

May be required based on final location and elevations of facilities Type of Water Supply:
Community Public Well Distance from well 100 feet Five years Permit valid for: Permit conditions: ☐ No expiration 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: WYNN CONSTRUCTION PROPERTY LOCATION: HWY 274 Facility Type: SFO(60×50')

New Expansion Repair

Basement?

Yes No

Type of Wastewater System** Pume To 25% REDUCTION SYSTEM (Initial) Wastewater Flow:

GPD (See note below, if applicable \square) Pump To 25% REDUCTION (Repair) Installation Requirements/Conditions Septic Tank Size 1000 gallons Pump Tank Size _ 1000 gallons Maximum Trench Depth of: 18 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: _____ft. TDH vs. ____ GPM Conditions: TIXIS PERMIT BASED ON A PROPOSAL FROM APPLICANTS inches above pipe inches total 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: 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: Construction Authorization Expiration Date: 8 3

Harnett County Department of Public Health Site Sketch

	PROPERTY LOCATON: HWIZTW	
ISSUED TO: WYMM CONSTONCTION	SUBDIVISION TIMBEN POINTE	LOT # 7)
Authorized State Agent:	RENS COLHER TOLKSDONE Date: 8 23 20	
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