26188

HTE# 10-5-24993 Harrier County Department of Public malth

Improvement Permit

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: Alpine Dr SUBDIVISION The Sunni Site Improvements required prior to Construction Authorization Issuance: 43 X55 Type of Structure: conventions Proposed Wastewater System Type: Projected Daily Flow: 360 Number of Occupants: Number of bedrooms: Basement Yes ☐ No May be required based on final location and elevations of facilities Pump Required: □Yes Type of Water Supply:

Community Public Well Distance from well 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, .1954, .1955, .1956, .1955, .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: MSP Contraction ☐ Expansion ☐ Repair (Initial) Wastewater Flow: 366 Type of Wastewater System** (See note below, if applicable

) Installation Requirements/Conditions Number of trenches Exact length of each trench 75 Septic Tank Size /000 Pump Tank Size _____ gallons Trenches shall be installed on contour at a Maximum Trench Depth of: 29 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. **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: &

Harnett County Department of Public Health Site Sketch

ISSUED TO: MSP Construction + Desp. SUBDIVISION The Superit LOT # 88

Authorized State Agent: Layor Mai Letts Date: 8/23/200

