HTE# 10-5-25304

Harnett County Department of Public Health

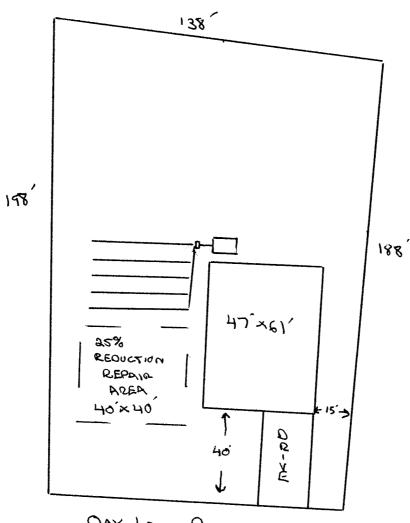
Improvement Permit

26295

		A building permit cannot be issued	ACITION (N) - 1)	A	
ISSUED TO: WYMM	CONSTRUC	SUBDIVISION	SUMMED.	OUGALD RO	107 #20
NEW JX KEPAIR	∐ EXPAN!	SION	Site Improvements r	required prior to Construction Auth	LOT #3 <u>0</u>
Type of Structure: 550	(47×61°)		sice improvements t	equired prior to construction Auth	orization issuance:
Proposed Wastewater System Typ	ie: 25% R	EDUCTION SYSTEM			
Projected Daily Flow: 36	C GPD	_			
Number of bedrooms: 3	Number of Occ	cupants: <u>G</u> max			
Basement Tyes No	V				
Pump Required: Tes 1	No May be red	quired based on final location and el	evations of facilities		
Permit conditions:	nunity X Public	☐ Well Distance from well	100 feet	Permit valid for:	Five years No expiration
Authorized State Agent::	the state of	RENS Date:	- classia:		
The issuance of this permit by the Health	Department in no way our	trantees the issuance of other permits. The new	mit holder is many iff. ()	Lander to the second of the se	TACHED SITE SKETCH
site is subject to revocation if the site pl the Laws and Rules for Sewage Treatment	and brack of the intelliged fire	e changes, the improvement remit (nam nor	be affected by a change in own	necking with appropriate governing bodies in nership of the site. This permit is subject to	in meeting their requirements. This o compliance with the provisions of
		Construction A	<u>uthorization</u>		
T1		(Required for Bui	lding Permit)		
.,		.1954, .1955, .1956, .1957, .1958. and .1959			
ISSUED TO: WYMN	CONSTRUC	PROPER SUBDIVI	TY LOCATION:	DOUGALD RO	
Facility Type: SFD(4-	(x61)	SUBDIVI	20 wwe	2 HILL	LOT# <u>30</u>
racinty type. 31 201	1 / 0 / /	ÆŲ New Ų ∐ Expa	nsion 🗌 Repair		
	No Basement Fin	xtures? Yes No	· -		
Type of Wastewater System**	<u> </u>	LEDUCTION SYST	EM	(Initial) Wastewater Flow:	<u>360</u> GPD
See note below, if applicable I	4) 250/5 E	REDUCTION SYSTEM			
netallation Danvissers 4. 15 P.		MEDIO CHION CHELL	<u>(C</u> (Repair)		
nstallation Requirements/Condit eptic Tank Size <u>\</u>		Number of trenches			
	gallons	Exact length of each trench _		Trench Spacing:	Feet on Center
Pump Tank Size	gallons	Trenches shall be installed on			inches
		Maximum Trench Depth of: 15		(Maximum soil cover shall I	not exceed
		(Trench bottoms shall be level	to +/-1/4"	36" above the trench bott	tom)
		in all directions)			,
ump Requirements:	ft. TDH vs	GPM			inches below pipe
				Aggregate Depth:	
onditions:				· ·	inches total
'ATER LINES (INCLUDING IR O UTILITIES ALLOWED IN IN	RIGATION) MUST E ITIAL OR REPAIR D	BE 10FT. FROM ANY PART OF S DRAIN FIFI D ARFA	SEPTIC SYSTEM OR R	EPAIR AREA.	
		is different from the type specifi	ied on the annlication	I accent the specifications of t	hic normit
	. ,, ,	ype speem	es on the appreation.	T accept the specifications of the	nis permit.
wner/Legal Representative Signa	iture:			Data	
s Construction Authorization is subject to	revocation if the site plan, p	plat, or the intended use changes. The Constru	ction Authorization shall not be	transferred when there is a change in ou	marchin of the size This
astruction Authorization is subject to comp	liance with the pravisions of	the Laws and Rules for Sewage Treatment ar	d Disposal and to the condition	ns of this permit.	ATTACHED SITE SKETCH
			i and condition	;	MINCHED SHE SKEICH
thorized State Agent:	11 11	SENZ	Date: _	10/25/101	<u>-</u>
		Constitution Author	ization Expiration Da	te: 10/25/15	

Harnett County Department of Public Health Site Sketch

PROPERTY LOCATON: McDougaro Ro SUBDIVISION Symmer HILL ISSUED TO: WYON CONSTRUCTION LOT # 30 Authorized State Agent: DENS (OLIVER TOLKSOCKE) Date: 10 25 10



OAK LEAF DRIVE