HTE# 10-5-25305

Harnett County Department of Public Health

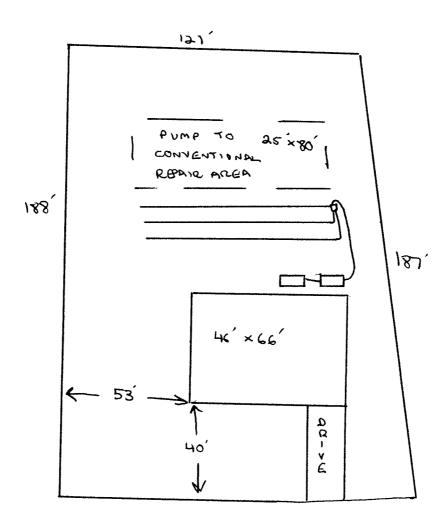
Improvement Permit

26296

, A b	uilding permit cannot be issued wi	th only an Improvemen	t Permit JGALO RD		
ISSUED TO: WYMM CONSTRUCTION	PROPERTY LOCA	ATION: MCOOL	HORU NO	LOT # 3)	
NEW REPAIR CONTROL SECULOR STRUCTURES SECULOR STRUCTURES SECULOR SECURITION DEVELOPMENT OF THE PAIR CONTROL SECURITION SE			equired prior to Construction Autho		
Type of Structure: SFO(66'>46)					
Proposed Wastewater System Type: Pump To Co	WENCIONER				
Projected Daily Flow: 360 GPD	C				
Number of bedrooms: Number of Occupan	its:max				
Basement No					
Pump Required: Yes	d based on final location and elev	ations of facilities			
Type of Water Supply: Community Public Permit conditions:	☐ Well Distance from well	feet feet	Permit valid for:	☐ Five years	
Termit conditions.				☐ No expiration	
		``			
Authorized State Agent::	RENS Date:	10/25/10	(FE AT)	ACHED SITE SKETCH	
The issuance of this permit by the Health Department in no way guarantee	s the issuance of other permits. The permi	t holder is responsible for cha	ecking with appropriate governing hodies in	meating their requirements. This	
site is subject to revocation if the site plan, plat, or the intended use chan	ges. The Improvement Permit shall not be	affected by a change in own	ership 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 o	this permit				
	Construction Au	<u>thorization</u>			
	(Required for Build	ing Permit)			
The construction and installation requirements of Rules .1950, .1952, .1954	, .1955, .1956, .1957, .1958, and .1959 a	re 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	INC PROPERTY	LOCATION: M	Druggen Ro		
	CHRUNCH	ON Summer	11/12	LOT # <u>3 \</u>	
Facility Type: SFD(66'×46')	SUBUNISIO Expans	sion 🗆 Repair	MILL	[0] # <u>3]</u>	
Basement? Yes No Basement Fixture		sion 🗀 kepair			
	CONVENTIONAL		/t '.' t\ tat	2/	
(See note below, if applicable X)	CONTENTIONAL		(Initial) Wastewater Flow:	360 GPD	
Oce note below, if applicable 201	CONVENTIONAL	(B :)			
		(Kepair)			
	Number of trenches 3	-	9		
	xact length of each trench 🕏		Trench Spacing:	Feet on Center	
	renches shall be installed on co		Soil Cover: 6-18	nches	
	1aximum Trench Depth of: 18		(Maximum soil cover shall r	not exceed	
(Trench bottoms shall be level to	o +/-I/4"	36" above the trench bott	om)	
	n all directions)				
Pump Requirements:ft. TDH vs	GPM		6_	inches below pipe	
			Aggregate Depth:2	inches below pipe inches above pipe	
Conditions:			1	inches total	
VATER LINES (INCLUDING IRRIGATION) MUST BE	INFT FROM ANY PART OF SI	PTIC SYSTEM OR R	FPAIR AREA		
IO UTILITIES ALLOWED IN INITIAL OR REPAIR DRA	IN FIFI D ARFA	LI TIC SISILM ON N	ILI AIN ANLA.		
*If applicable: I understand the system type specified is	different from the type specifie	d on the application.	I accept the specifications of the	his permit.	
				•	
Owner/Legal Representative Signature:			Date:		
his Construction Authorization is subject to revolution 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					
onstruction Authorization is compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit.					
			3		
uthorized State Agent: Date: 10 25 16					
Construction Authorization Expiration Date: 10 26 15					
		on Expination Do	~~~·	1	

Harnett County Department of Public Health Site Sketch

PROPERTY LOCATON: McDougaso Ro	
ISSUED TO: WYAN CONSISSOCTION INC SUBDIVISION SUMMER HILL	LOT # <u>3 \</u>
Authorized State Agent: Date: 10 25 10	



OAR LEAF DRIVE