HTE#<u>10-5-25584</u>

Harnett county Department of Public Hearn

26369

Improvement Permit

A	building	permit	cannot b	e issued	with	only	an	Improvement	Permit	
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	PROPERTY LOCATION:	DVERMILLS RD	
ISSUED TO: JOSEPHA RAILLIPS	SUBDIVISION TANK		LOT # LOT
NEW 🗶 REPAIR 🗆 _ EXPANSION 🗆 .	Site Impro	ovements required prior to Con	struction Authorization Issuance:
Type of Structure: <u> </u>	DRIN	VENAN LOCATION	MUST BE MARKED
Proposed Wastewater System Type: Pume To 25% REDUCTION	N		
Projected Daily Flow: 360 GPD			
Number of bedrooms: Number of Occupants:	max		
Basement 🖄 es 🗆 No			
Pump Required: 14es D No X May be required based on fina	location and elevations of faci	ilities	
Type of Water Supply: Community Vell Dis	ance from well <u>100</u>	feet Pern	nit valid for: 🔀 Five years
Permit conditions:			No expiration
- Alt M		······································	
Authorized State Agent:		10	SEE ATTACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guarantees the issuance of o site is subject to revocation if the site plan, plat, or the intended use changes. The Improvement	ner permits. The permit holder is resp nt Permit shall not be effected by a c	onsible for checking with appropriate	governing bodies in meeting their requirements. This
the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.	No remains shall not be anected by a C	mange in ownership of the site. This p	ermit is subject to compliance with the provisions of
Const	ruction Authoriza	tion	
	equired for Building Permit)		
The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .199 with the attached system layout.	7, .1958. and .1959 are incorporated	by references into this permit and sh	all be met. Systems shall be installed in accordance
ISSUED TO: JOSEPH PHILLIPS		\bigcirc	0
ISSUED TO: JOSEPH PHILLIPS			
ture to Geologia (SUBDIVISION TR	NLOR	LOT # <u>_ </u>
Facility Type: SFD(60'×60') New] Repair	
Basement? X Yes D No Basement Fixtures? X Yes	□ No		
Type of Wastewater System** PUME TO 25% REC	NOTION DYSTEM	(Initial) Wast	ewater Flow: <u>360</u> GPD
(See note below, if applicable □) Pume To 25% REDUCE			
Installation Requirements/Conditions Number of tree			
• • • • • • • • • • • • • • • • • • •	each trench 90	feet Trench Spacing:	9 Feet on Center
8	be installed on contour at a		
	h Depth of: 18-24	- (l cover shall not exceed
	s shall be level to $+/-1/4$ "	36" above ti	ne trench bottom)
in all direction:)		
Pump Requirements:ft. TDH vs GPM			inches below pipe
	\sim	Aggregate Deptl	n: inches above pipe
Conditions: SEE ALL CONDITIONS ON SITE	DKETCH		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:	Date:
This Construction Authorization is subject to revocation if the site plan, plat, or the int	tended use changes. The Construction Authorization shall not be transferred when there is a change in ownership of the site. This
Construction Authorization Estiblect to compliance with the provisions of the Laws and	d Rules for Sewage Treatment and Disposal and to the conditions of this permit. SEE ATTACHED SITE SKETCH
Authorized State Agent:	Construction Authorization Expiration Date: 3]31]14

