HTE# 17-5-25843

Harnett County Department of Public Health

26388 **Improvement Permit** A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: Docs Ro CONSTRUCTION SUBDIVISION TROTTERS RIDGE ISSUED TO: WYMM NEW X REPAIR EXRANSION 🗆 Site Improvements required prior to Construction Authorization Issuance: SED (49'X57 Type of Structure: Proposed Wastewater System Type: 25% REDUCTION SYSTEM Projected Daily Flow: 48 0 GPD Number of Occupants: Number of bedrooms: Basement Tes ⊠ No Pump Required: □Yes ➢ No ☐ May be required based on final location and elevations of facilities Type of Water Supply:
Community
Public
Well Distance from well 100 feet Permit valid for: ⊠ Five years Permit conditions: ☐ No expiration REHS Date: 1/19/11 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 CONSTONCTION PROPERTY LOCATION: Does Ro SUBDIVISION PROTERS PLACE LOT # 4 Facility Type: SED (LIF 157)

New Expansion
Repair Basement Fixtures?

Yes

No Basement? Yes No 25% REDUCTION SYSTEM (Initial) Wastewater Flow: 480 GPD Type of Wastewater System** (See note below, if applicable X) 25% REDUCTION SYSTEM (Repair) **Installation Requirements/Conditions** Number of trenches 5 Exact length of each trench 50 feet Trench Spacing: 9 Feet on Center Septic Tank Size 1000 gallons Pump Tank Size _____ gallons Trenches shall be installed on contour at a Soil Cover: \2 inches Maximum Trench Depth of: 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 _____ inches below pipe Aggregate Depth: 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

Authorized State Agent:

| Date: 1/9/11 | Construction Authorization Expiration Date: 1/9/14 | Construction Authorization Expiration Date: 1/9/14

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.

Harnett County Department of Public Health Site Sketch

ISSUED TO: WYNN (Authorized State Agent:	PROPERTY LOCATON: DOCS RO CONSTRUCTION SUBDIVISION TROTTERS RIGHE REMS (ORMER TOLKSDORT) Date: 1/19/11	LOT # _ _
	133'	
	25°10 REDUCTION REPAIR AREA 5'	

KENTUCKY BERBY LN