HTE# 11-5-25988

Harnett County Department of Public Health

Improvement Permit

26393

A	building	permit	cannot	be	issued	with	only	an	Improvement Permit	
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PROPERTY LOCATION: TINGEN RO	
ISSUED TO: BILL CLARK HOMES SUBDIVISION PATIONS POINT LOT #	31
NEW 🔀 REPAIR 🗆 🔿 EXPANSION 🗆 Site Improvements required prior to Construction Authorization Issuance:	
Type of Structure: SFD(146'453)	
Proposed Wastewater System Type: 25% REDUCTION SYSTEM	
Projected Daily Flow: <u>360</u> GPD	
Number of bedrooms: Number of Occupants: max	
Basement □Yes 🕱 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 <u>100</u> feet Permit valid for: 🔎 Five years	
Permit conditions: 🗆 No expirati	on
the is	
Authorized State Agent:: SEE ATTACHED SITE SKETCH	
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 requirem 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 pro	ents. This
the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.	VISIONS OF
Construction Authorization	
(Required for Building Permit)	
The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .1958. and .1959 are incorporated by references into this permit and shall be met. Systems shall be installed in acc with the attached system layout.	ordance
ISSUED TO: <u>BILL CLARK HOMES</u> SUBDIVISION <u>PATIONS POINT</u> LOT # <u>3</u>	
SUBDIVISION PATTONS POINT LOT # 3	51
SUBDIVISION <u>Pattons Point</u> LOT # 3 Facility Type: <u>5FO(ひんえらろ)</u> X New □ Expansion □ Repair	
Basement? 🗌 Yes 🔟 No Basement Fixtures? 🗋 Yes 🖾 No	
	GPD
(initial) wastewater riow. <u>See or</u> (initial) wastewater riow.	ULD
DE REDUCTION SYSTEM (Repair)	
nstallation Requirements/Conditions Number of trenches 1	
ieptic Tank Size 1000 gallons Exact length of each trench 260 feet Trench Spacing: <u>9</u> Feet on Center	
Pump Tank Size 1000 gallons Trenches shall be installed on contour at a Soil Cover: 12 inches	
NG REFERENCE Maximum Trench Depth of: 24 inches (Maximum soil cover shall not exceed	
(Trench bottoms shall be level to $+/-1/4$ " 36" above the trench bottom)	
in all directions)	
in all directions)	w pipe
in all directions) Pump Requirements:ft. TDH vs GPM inches belo	
in all directions) Pump Requirements:ft. TDH vs GPM Aggregate Depth: inches abo	

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 intended use changes. The Construction Authorization shall not be transferred when there is a change in ownership of the site. This	J
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.	
Authorized State Agent: Construction Authorization Expiration Date:	



