HTE#17-5-25954

Harnett County Department of Public Health

Improvement Permit

26482

	μ		be issued with only an Ir			
ISSUED TO: Cumber	2000 Has	PF	ROPERTY LOCATION: Y	17C50	1 OWER KD	
NEW M REPAIR	EXPANSIO					LOT # <u>15</u>
NEW REPAIR Type of Structure: 550 (35 ×5 W	JN LI	site impro	vements re	quired prior to Construction Auth	orization Issuance:
Proposed Wastewater System Type	25% RE	DUCTION SYST	-FW			
Projected Daily Flow: 360		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
Number of bedrooms: 3	Number of Occu	pants: 6 ma	X			
Basement 🗆 Yes 🔀 No						
Pump Required: ☐Yes À N	o 🗆 May be requ	ired based on final locat	tion and elevations of faci	lities		
Type of Water Supply: Comm	unity 🗷 Public	☐ Well Distance	from well 100	feet	Permit valid for:	Five years
Permit conditions:						☐ No expiration
	- Allen					
		24.74				
Authorized State Agent::		2645	Date: 3 \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \))	SEE A	TTACHED SITE SKETCH
The issuance of this permit by the Health site is subject to revocation if the site plat the Laws and Rules for Sewage Treatment	n, plat, or the intended use	changes. The Improvement Perr	rmits. The permit holder is respi mit shall not be affected by a cl	onsible for che hange in own	ccking with appropriate governing bodies ership of the site. This permit is subject (in meeting their requirements. This to compliance with the provisions of
		<u>Construc</u>	ction Authoriza	<u>tion</u>		
			ed for Building Permit)			
The construction and installation requireme with the attached system layout.	nts of Rules .1950, .1952, .1	954, .1955, .1956, .1957, .195	58. and .1959 are incorporated	by references	into this permit and shall be met. System	ns shall be installed in accordance
ISSUED TO: Cumber	LAND Hom	ies Inc	PROPERTY LOCATION:	M	CRO TOWER RO	
0 -0 (0.5	-03		SUBDIVISION	NGEN	PLACE	LOT # <u>\5</u>
Facility Type: 5FOGF			☐ Expansion ☐	Repair		
		tures? 🗆 Yes 🔀	₹No			
Type of Wastewater System**	25% R	EDUCTION S	SYSTEM		(Initial) Wastewater Flow:	360_GPD
(See note below, if applicable ₹					, ,	, , , , , , , , , , , , , , , , , , , ,
	25% K	ZOUCTION S	x57Em (Repair)			
Installation Requirements/Condit	<u>ions</u>	Number of trenches	2			
Septic Tank Size 1600	gallons	Exact length of each	n trench 75	feet	Trench Spacing: 9 Soil Cover: 6-12	Feet on Center
Pump Tank Size	gallons		stalled on contour at a		Soil Cover: 6-12	inches
	- -	Maximum Trench De	epth of: 18-217	inches	(Maximum soil cover shall	
			Il be level to +/-1/4"		36" above the trench bo	
		in all directions)			and the state of t	,
Pump Requirements:	ft. TDH vs.					inches below pipe
		_			Aggregate Depth:	
Conditions:	***************************************			····	Aggregate Deptil.	inches total
WATER LINES (INCLUDING IR	RIGATION) MUST I	BF 10FT, FROM ANY	PART OF SEPTIC SYST	TFM OR F	REPAIR AREA	
NO UTILITIES ÀLLOWED IN IN						
**If applicable: / understand the	system type specified	is different from the	type specified on the a	pplication.	I accept the specifications of	this permit.
Owner/Legal Representative Sign	ature:				Date:	
Owner/Legal Representative Signa This Construction Authorization is subject to	revocation if the site plan,	olat, or the intended use chang	ges. The Construction Authorizati	on shall not l	oe transferred when there is a change in	ownership of the site. This
Construction Authorization is subject to com	pliance with the provisions o	the Laws and Rules for Seway	ge Treatment and Disposal and	to the conditi	ons of this permit. SEE	ATTACHED SITE SKETCH
					1 2	,
Authorized State Agent:	02/1/4	111.11	RENS	Date:	3) 1) 3) ate: 3) 11) 16	
		Construct	tion Authorization Exp	iration D	ate: 3 m 16	_
		Construct	tion Authorization Exp	iration D	ate: 3 n 16	

Harnett County Department of Public Health Site Sketch

	PROPERTY LOCATON: MICRO TOWER RD	
ISSUED TO: Comorci	ZLAND Homes INC SUBDIVISION TINGEN PLACE	LOT # <u>\ \ 5</u>
Authorized State Agent:	PENS (DENER TOLKSDORF) Date: 3/11/11	
	110	
	154' 35' 54' DR-YU 40 133'	

TOWER DR