HTE#_11-5-25998

Harnett County Department of Public Health Improvement Permit

26461

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: DOCS RD ISSUED TO: SIGNATURE HOME BUILDERS SUBDIVISION TRATTERS RIOSE NEW 図 REPAIR □ EXRAN
Type of Structure: 5 F D (40 × 46) Site Improvements required prior to Construction Authorization Issuance: Proposed Wastewater System Type: 25% REDUCTION SYSTEM Projected Daily Flow: 460 GPD Number of bedrooms: ___ Number of Occupants: 8 max Basement Yes 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 Five years Permit valid for: ☐ No expiration **RCHS** Authorized State Agent:: 2/18/11 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 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: SIGNATURE HOME BUILDERS PROPERTY LOCATION: DOCS RD
SUBDIVISION TROTTERS RIGGE Facility Type: SFD(40'x46) New Expansion Repair Basement?

Yes No Basement Fixtures?

Yes No

Type of Wastewater System**

ASTOMATION SYSTEM (Initial) Wastewater Flow:

H80 GPD (See note below, if applicable) 25% REDUCTION SYSTEM (Repair) **Installation Requirements/Conditions** Number of trenches \(\frac{1}{2}\) Exact length of each trench 270 feet Trench Spacing: 9 Feet on Center Trenches shall be installed on contour at a Soil Cover: 32" inches Septic Tank Size 1000 gallons Pump Tank Size _____ gallons Maximum Trench Depth of: 444 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. 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. SEE ATTACHED SITE SKETCH Authorized State Agent:

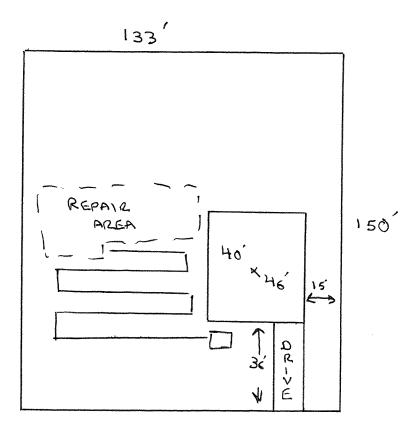
Construction Authorization Expiration Date:

| HTE# 11-5-259 | 198 |
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Permit # <u>26461</u>

Harnett County Department of Public Health Site Sketch

| PROPERTY LOCATON: Docs Ro | | |
|---|-------|---|
| ISSUED TO: SIGNATURE HOME BUILDERS SUBDIVISION TROTTERS RIDGE | LOT # | 3 |
| Authorized State Agent: RENS (OLIVER TOLKSON)Date: 2/17/1) | | |
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KENTUCKY DERBY LN