HTE# 11-5-26197

Harnett county Department of Public Health

Improvement Permit

26491

A building permit cannot be issued with only an Improvement Permit ISSUED TO: WYNN CONSTRUCTION PROPERTY LOCATION: MARKS RO
SUBDIVISION CORERS FARM NEW 🔀 REPAIR 🗆 Site Improvements required prior to Construction Authorization Issuance: さたの (アグンス) DRAINFIELD AREA TO BE FENCEOUFF. AGEA Type of Structure: Proposed Wastewater System Type: 25% REDUCTION Projected Daily Flow: 360

Number of bedrooms: 3 TH BE HAND CLEARED OR LEFT UNDISTURBED Number of Occupants: FOR SEPTIC INSTALLATION. SEE SITE SKETCH. Basement TYes Pump Required: □Yes ☐ May be required based on final location and elevations of facilities Type of Water Supply:

Community

Public

Well Distance from well

Feet Permit valid for: Permit conditions: REHS Date: 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: WYMN CONSTRUCTION PROPERTY LOCATION: MARKS RO Facility Type: SFO(10277)

SUBDIVISION Coopers Fram

LOT # 22

New Expansion Repair

Basement? Yes No Basement Fixtures? Yes No 25% REDUCTION SYSTEM (Initial) Wastewater Flow: 360 GPD Type of Wastewater System** (See note below, if applicable □) 25% REDUCTION SYSTEM (Repair) Number of trenches 1 **Installation Requirements/Conditions** Exact length of each trench 180 feet Trench Spacing: Feet on Center Trenches shall be installed on contour at a Soil Cover: inches Septic Tank Size 1000 gallons Pump Tank Size _____ gallons Maximum Trench Depth of: 18 inches (Maximum soil cover shall not exceed (Trench bottoms shall be level to $\pm \frac{1}{4}$ " 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 lite 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 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. Date: 3 4/14/1/ Authorized State Agent: Construction Authorization Expiration Date:

Harnett County Department of Public Health Site Sketch

