HTE# 11-5-26245 R Harnett county Department of Public Hearen

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· ·	Improvement Permit	26435
	cannot be issued with only an Improvement	
A building permit	PROPERTY LOCATION: <u>BR 1419</u> Za	
ISSUED TO: WILLEAM + MARY PROVEL	SUBDIVISION	LOT #
		uired prior to Construction Authorization Issuance:
Type of Structure:SAS	Site improvements rec	uned prior to construction Authorization issuance.
Proposed Wastewater System Type: 25% ZCAUCADO		
Projected Daily Flow: <u>360</u> GPD		
Number of bedrooms: <u>3</u> Number of Occupants: <u>6</u>	max	
Basement 🖾 Yes 🗌 No 🖉		
Pump Required: □Yes □ No ☑ May be required based on f	nal location and elevations of facilities	
	Distance from well <u>100</u> feet	Permit valid for: 🛛 Five years
Permit conditions:		No expiration
Contractor to M	Let NSTR P.	rion to Install
	All Ban	-
Authorized State Agentz James (Anhants	Date: 3-25-11	SEE ATTACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guarantees the issuance of	f other permits. The permit holder is responsible for che	cking 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 Improv the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.	ement Permit shall not be affected by a change in owne	rship of the site. This permit is subject to compliance with the provisions of
are cars and rates to senage requirem and suspess and to conditions of this permit.		
ſ	administra Aridhaninadian	and and a second sec
<u>Lor</u>	struction 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: WILLEAM + MARY Prough	PROPERTY LOCATION - 30 . 1	418 Trues 78
ISSUED TO:TITLET TITLET TOUGH	PROPERTY LOCATION: SUBDIVISION	LOT #
Facility Type: SED		L01 #
_		
Type of Wastewater System** 25% (25/2020) =	syster_	(Initial) Wastewater Flow: <u>360</u> GPD
(See note below, if applicable \Box)		
25%1245D (Monita	2_) (Repair)	
Installation Requirements/Conditions Number of	renches <u>2</u>	G
Septic Tank Size <u>1000</u> gallons Exact length	of each trench <u>150</u> feet	Trench Spacing: Feet on Center
	ll be installed on contour at a	Soil Cover: 4 inches
. Maximum Ti	ench Depth of: <u>24</u> mapinches	(Maximum soil cover shall not exceed
	oms shall be level to $+/-1/4$ "	36" above the trench bottom)
in all direct		
Pump Requirements:ft. TDH vs GPM	015)	e inches below pipe
		Aggregate Denthi Z inches show pipe
Conditions: <u>Contactor</u> to Meet	Malsrit 200	Aggregate Depth: Z inches above pipe
conditions: Confingeron Fo Fileer	opositie pron	te Install. 12 inches total
		······································
WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FRO	M ANY PART OF SEPTIC SYSTEM OR F	REPAIR AREA.
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD ,		
<u>**If applicable:</u> I understand the system type specified is different for	om 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 intende	-	5 I
Construction Authorization is subject to compliance with the provisions of the Laws and Rule	s for Sewage Treatment and Disposal and to the condition	ons of this permit. SEE ATTACHED SITE SKETCH
ð./	ha farrows	. /
Authorized State Agent: James CMA-	hant Date:	3-25-11 4-21-11

Construction Authorization Expiration Date: ____

4-21-16

3-25-4

