11-5-26249

Harnett County Department of Public Health

HTE# <u>11-5-26278</u> Harnett County Department of Public Health	
Improvement Permit	26497
A building permit cannot be issued with only an Improvement Permit	
ISSUED TO: BANANY HOMES INC SUBDIVISION TOSHING HERRING	LOT # ++
NEWX REPAIR EXPANSION Subbrision Site Improvements required prior to Construction Aut Type of Structure: Set (Set > 50') Site Improvements required prior to Construction Aut	
Proposed Wastewater System Type: CONVENTIONEL Projected Daily Flow: 360 GPD	
Number of bedrooms: <u>3</u> Number of Occupants: <u>6</u> max Basement ¤Yes X No	
Pump Required: Yes X 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
Authorized State Agent::	
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. Sys	stams chall he installed in accordance

The construction and with the attached system layout.

ISSUED TO: BANAH HOMES INC	PROPERTY LOCATION:	LL LUCAS RD
	SUBDIVISION TOSAIKO	HERRINC LOT # 4
	_ 📉 New 🛛 Expansion 🛛 Repair	
Basement? 🗆 Yes 🔀 No 🖉 Basement Fixtu		
Type of Wastewater System** CONVENT	IONAL	(Initial) Wastewater Flow: <u>360</u> GPD
(See note below, if applicable 🗆)		
CONVENT	TIONAL (Repair)	
Installation Requirements/Conditions	Number of trenches	^
Septic Tank Size 1000 gallons	Exact length of each trench <u>っこ</u> feet	Trench Spacing: Feet on Center
Pump Tank Size gallons	Trenches shall be installed on contour at a	Soil Cover: 12 inches
	Maximum Trench Depth of: <u>24</u> 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
Conditions:		12 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: / 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
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: Date: Construction Authorization Expiration Date:	11

