HTE#11-5-26594

Harnett County Department of Public Health

Improvement Permit

26568

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: LASATER RD ISSUED TO: HUGH SURVES BUILDERS SUBDIVISION NEW X REPAIR C EXPANSION C Type of Structure: SFO(68×83) Site Improvements required prior to Construction Authorization Issuance: Proposed Wastewater System Type: 25% REDUCTION SYSTEM Projected Daily Flow: 360 GPD Number of Occupants: __ C ___max Number of bedrooms: ___ Basement □Yes X No Pump Required: □Yes ☐ 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: Permit conditions: ☐ No expiration Authorized State Agent::

Date: 5 12 1)

SEE ATTACHED SITE SKETCH

The issuance of this permit by the Health Department in no way guarantees the issuance of the 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: HUGH SURLES BUILDERS PROPERTY LOCATION: LASATER RD SUBDIVISION Type of Wastewater System** (See note below, if applicable □) 25% REDUCTION SYSTEM (Repair) Number of trenches 3 Installation Requirements/Conditions Exact length of each trench 80 feet Trench Spacing: 9 Feet on Center Trenches shall be installed on contour at a Soil Cover. Septic Tank Size 1000 gallons Pump Tank Size _____ gallons Trenches shall be installed on contour at a Maximum Trench Depth of: ______ inches (Maximum soil cover shall not exceed (Trench bottoms shall be level to $\pm 1/4$ " 36" above the trench bottom) in all directions) Pump Requirements: _____ft. TDH vs. ____ GPM Aggregate Depth: ______ inches above pipe Conditions: 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 site plan, plan 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 consoliance with the provision of this permit. SEE ATTACHED SITE SKETCH Authorized State Agent: _

Construction Authorization Expiration Date:

Harnett County Department of Public Health Site Sketch

