HTE# 17-5-26927 R Harnett county Department of Public Health

Improvement Permit

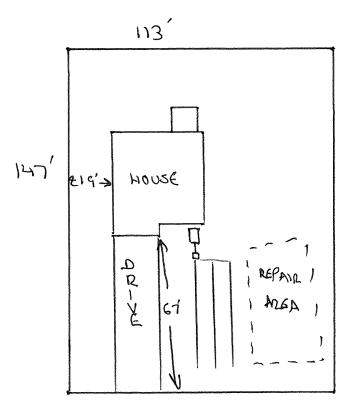
26652

DR HOGSON IN CA building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: OVERWILLS RE
ISSUED TO: STONE COSS LCC SUBDIVISION STONE CROSS LOT # LOZ
NEW REPAIR CONSTRUCTION Authorization Issuance:
Type of Structure: 550 (Dox 30) (45 x 38)
Proposed Wastewater System Type: Pume To 25% REDUCTION * SEE NOTE BELOW
Projected Daily Flow: 360 GPD
Number of bedrooms: Number of Occupants: max
Basement 🗆 Yes 🔀 No
Pump Required: Tes One May be required based on final location and elevations of facilities
Type of Water Supply: Community Public Well Distance from well 100 feet Permit valid for: Five years
Permit conditions: No expiration
Authorized State Agent" SEE ATTACHED SITE SKETCH
Authorized State Agent:: 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 Dispersion and to condition of this permit.
RE11560 7 22/13
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
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Delighon
ISSUED TO: STONE CROSS L'EC PROPERTY LOCATION: OVERHILLS RD
SUBDIVISION STONE CROSS LOT # 102
racility Type:
Basement? Yes No Basement Fixtures? Yes No
Type of Wastewater System** Pung To 25% REDUCTION SYSTEM (Initial) Wastewater Flow: 360 GPD
(See note below, if applicable \square)
PUME TO 25% REDUCTION (Repair)
Installation Requirements/Conditions Number of trenches
Septic Tank Size 1000 gallons Exact length of each trench 40 feet Trench Spacing: 9 Feet on Center
Pump Tank Size 1000 gallons Trenches shall be installed on contour at a Soil Cover: 6-12 inches
Pune May BE On 1560 Maximum Trench Depth of: 18-24 inches (Maximum soil cover shall not exceed
(Trench bottoms shall be level to +/-1/4" 36" above the trench bottom)
BE MAINTAINED in all directions)
Pump Requirements:ft. TDH vs GPM inches below pipe
Conditions: PERMY BASED ON A PROPOSAL FROM APPLICANTS LSS 12 inches total
Conditions: PERMY BASED ON A PROPOSAL FROM APPLICANTS LSS Aggregate Depth: 2 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.
** f applicable: understand the system type specified is different from the type specified on the application. accept the specifications of this permit.
The applicable: I understand the system type specified is different from the type specified on the application. I accept the specifications of this perime.
Owner/Legal Representative Signature: Date:
Owner/Legal Representative Signature: 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
Construction numerication is subject to compinance mixture problems of the state and makes to sende mountain and problems and to the construction of the periods
Authorized State Agent: Date: 7/12/1)
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Construction Authorization Expiration Date:

HTE#	1	-5	J6971	R
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Harnett County Department of Public Health Site Sketch

- 11	PROPERTY LOCATON: OVERNIUS KO	
ISSUED TO: DR HORTON INC	SUBDIVISION STONE CROSS	LOT # 102_
Authorized State Agent:	Date:	



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