HTE# 11-5-26°126

Harnett County Department of Public Health Improvement Permit

26657

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: OVERNILLS ISSUED TO: STONE CROSS LLC SUBDIVISION STONE CROSS REPAIR 🗆 NEW 🔀 EXPANSION 🗆 Site Improvements required prior to Construction Authorization Issuance: Type of Structure: SFD (40'>50') Proposed Wastewater System Type: CONVENTIONAL Projected Daily Flow: 480 GPD Number of Occupants: 🖇 💮 max Number of bedrooms: ___ 4 Basement □Yes ➤ No **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 🕻 🔿 🔾 feet Permit valid for: Five years Permit conditions: ☐ No expiration Rans Date: __ Authorized State Agent:: SEE ATTACHED SITE SKETCH 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 Impresonment 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: STONE CROSS LLC PROPERTY LOCATION: OVERNALLS SUBDIVISION STONE CROSS LOT # 107 Facility Type: 5FD (40'x 50') | New | Expansion | Repair Basement? Yes No Basement Fixtures? ☐ Yes 🔀 No CONVENTIONAL (Initial) Wastewater Flow: 480 GPD Type of Wastewater System** (See note below, if applicable □) CONVENTIONAL **Installation Requirements/Conditions** Number of trenches Septic Tank Size 1000 gallons Exact length of each trench 200 feet Trench Spacing: 6 Feet on Center Trenches shall be installed on contour at a Soil Cover: 6-12 inches Pump Tank Size gallons 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) in all directions) Aggregate Depth: ______ inches below pipe inches above pipe ______ inches total Pump Requirements: ft. TDH vs. GPM 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: 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:

Construction Authorization Expiration Date:

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Permit # <u>26657</u>

Harnett County Department of Public Health Site Sketch

	PROPERTY LOCATON: OVERNILLS RO	
ISSUED TO: STONE CROSS LLC	SUBDIVISION BTONE CROSS	LOT # 107
Authorized State Agent:	REHS (OLIVER TOLKSDORF) Date: 7 14/11	

