HTE# 11-5-27419 R

Harnest County Department of Public nealth

Improvement Permit

26648

A	A building permit cannot be issued with only an Improvement Permit				
ISSUED TO: Atlantic Construc	PROPERTY LOCATION: C		<i>t.</i>		
				LOT # <u>-3</u>	
NEW REPAIR . , EXPANSION Type of Structure: SFD 60 X 3 4 2 4 2		vements required prior to	Construction Authoriza	tion Issuance:	
Proposed Wastewater System Type: Coavent: Projected Daily Flow: 360 460 GPD	System				
Number of bedrooms: 34 Number of Occup	pants: Le 8 max				
Basement Ses No	uitsiiiax				
	red based on final location and elevations of fac	ilities			
	☐ Well Distance from well		Permit valid for:	Five years	
Permit conditions:			time rand for.	☐ No expiration	
				no expiration	
- Auch					
Authorized State Agent:: // Lugar / Lugar	Date: 9/10	6/2011	SEE ATTACI	HED SITE SKETCH	
The issuance of this permit by the Health Department in no way guaran	tees the issuance of other permits. The permit holder is resp	onsible for checking with appropri	ate governing bodies in me	eting their requirements. This	
site is subject to revocation if the site plan, plat, or the intended use of the Laws and Rules for Sewage Treatment and Disposal and to condition	s of this permit.	hange in ownership of the site. If	us permit is subject to con	apliance with the provisions of	
	Construction Authoriza	tion			
The server of the I the II of the term of the term of	(Required for Building Permit)				
The construction and installation requirements of Rules .1950, .1952, .19 with the attached system layout.		by references into this permit and	d shall be met. Systems sha	ıll be installed in accordance	
ISSUED TO: Atlantic Contruc	PROPERTY LOCATION: SUBDIVISION	Will Lucas	- Rd		
				LOT # <u>_ プ</u>	
Facility Type: SFD	•] Repair			
Basement? Yes No Basement Fixt				480	
Type of Wastewater System**		~ dyster (Initial) W	/astewater Flow:	GPD GPD	
(See note below, if applicable \square)	25% deduction	•			
_ Cosilent	Number of trenches 3 (Repair)				
Installation Requirements/Conditions					
Septic Tank Size gallons	Exact length of each trench <u>80</u>	feet Trench Spacii	ng: <u> </u>	eet on Center	
Pump Tank Size gallons	Trenches shall be installed on contour at a				
	Maximum Trench Depth of: 24-30		soil cover shall not		
	(Trench bottoms shall be level to $\pm \frac{1}{4}$ "		e the trench bottom		
	in all directions)		o and distinct potential	1	
Pump Requirements:ft. TDH vs	GPM		6	inches below pipe	
		Aggregate Do	enth· 2	inches above pipe	
Conditions:		nggi egute Di	/2	inches total	
				miches total	
NATED LINES (INCLUDING IDDICATION) MUST D	E 10ET EDOM ANY DART OF CERTIC CYC	TEM OR DEDAIR AREA			
NATER LINES (INCLUDING IRRIGATION) MUST B	E TUFT. FRUM ANT PART UF SEPTIC STS	IEM UK KEPAIK AKEA.			
NO UTILITIES ALLOWED IN INITIAL OR REPAIR D	KAIN FIELD AKEA.				
**If applicable: I understand the system type specified	is different from the type specified on the a	pplication. I accept the	specifications of this	permit.	
/ner/Legal Representative Signature:					
Owner/Legal Representative Signature: Date:					
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.		ACHED SITE SKETCH	
$\overline{\mathcal{O}}$		/	/	1.1	
Authorized State Agent: June M.	Law REHS Construction Authorization Exp	Date: 9/16	12011 21	14/201	
	Construction Authorization Evr	piration Date: 9 4	12016 3	7/4/2018	
	veneración numerización Exp		· ; · · / ·	6 1	

Harnett County Department of Public Health Site Sketch

Authorized State Agent: Supply Mywai, REHS

PROPERTY LOCATON: Will Locar Ld.

SUBDIVISION Sweetwater LOT # 3

Date: 4/16/2017

3/14/2017

