HTE# 11-5-27534

## Harnett County Department of Public Health

## **Improvement Permit**

26759

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: Tongen Rd ISSUED TO: Stancil Builders, Inc SUBDIVISION Patters Point NEW REPAIR , EXPANSION Type of Structure: SFD 46x42 Site Improvements required prior to Construction Authorization Issuance: Proposed Wastewater System Type: 25% Loduction Tysten Projected Daily Flow: 360 Number of bedrooms: 3 Number of Occupants: \_\_\_ 6 max ₩ No Basement TYes ✓ 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 Five years Permit valid for: Permit conditions: \_\_\_\_ ☐ No expiration Authorized State Agent: Date: \_\_\_\_\_\_ Date: \_\_\_\_\_ 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 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. Facility Type: SFD □ New □ Expansion □ Repair Basement? Yes No Basement Fixtures? Yes No

Type of Wastewater System\*\* 25% Red wet in System (Initial) Wastewater Flow: 360 GPD Basement Fixtures? 

Yes (See note below, if applicable  $\square$ ) Installation Requirements/Conditions Number of trenches \_\_\_\_\_\_ feet Trench Spacing: \_\_\_\_\_ Feet on Center Tranchas shall be installed on contour at a \_\_\_\_\_ Soil Cover: \_\_\_\_\_ 24 - 6 \_\_\_\_ inches Septic Tank Size /00 gallons Pump Tank Size \_\_\_\_\_ gallons Maximum Trench Depth of: 36-18 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 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: 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, 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: Sup MS wain Kolf

Construction Authorization Expiration Date: 9/29/2016

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## Harnett County Department of Public Health Site Sketch

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