HTE# 17-5-27984R

Harnett County Department of Public Health

Improvement Permit

26880

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: McDougaco Ro ISSUED TO: WYMN CONSTRUCTION INC SUBDIVISION BUMMERHILL LOT # 🖰 REPAIR ☐ EXPANSION ☐ Site Improvements required prior to Construction Authorization Issuance: Type of Structure: SEO (5) 347 Proposed Wastewater System Type: Pume To 25% REDUCTION Projected Daily Flow: ____ 360 GPD Number of bedrooms: Basement □Yes ➤ No Pump Required: ≥Yes □ No ☐ 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 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 ISSUED TO: WYNN CONSTRUCTION PROPERTY LOCATION: McDOUGALD RO
SUBDIVISION SUMMERSHILL Facility Type: SFO (51×47) New Expansion Repair

Basement?

Yes No Basement Fixtures? Yes No PUMP TO 25% REDUCTION SYSTEM (Initial) Wastewater Flow: 360 GPD Type of Wastewater System** (See note below, if applicable □) PUMP TO 25% REDUCTION (Repair) Number of trenches 1 Installation Requirements/Conditions Exact length of each trench 260 feet Trench Spacing: 9 Feet on Center Trenches shall be installed on contour at a Soil Cover: 6 inches Septic Tank Size 1000 gallons Pump Tank Size 1000 gallons Maximum Trench Depth of: 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 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 reposation 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 imprecisions 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: 1/26/17

Harnett County Department of Public Health Site Sketch

