HTE# 12-5-202312

Harnett County Department of Public Health

Improvement Permit

26899

A building permit cannot be issued with only an Improvement Permit

PROPERTY	LOCATION: TAKET LAN	
ISSUED TO: WYAN CONSTRUCTION SUBDIVISIO	IN COOPER FARMS	LOT # <u>35</u>
NEWACI REPAIR ロ EXPANSION ロ Type of Structure: <u>ちゃっ いい</u>	Site Improvements required prior to Construction Aut	horization Issuance:
Type of Structure: <u>SFO (ムエメフエ)</u>		
Proposed Wastewater System Type: 25% REDUCTION SYSTEM		
Projected Daily Flow: GPD		
Number of bedrooms: <u>3</u> Number of Occupants: <u>6</u> max		
Basement \Box Yes \nearrow No		
Pump Required: TYes Trans No Day be required based on final location and		
Type of Water Supply: 🗗 Community 🔀 Public 🗆 Well Distance from wel	I <u>100</u> feet Permit valid for:	Five years
Permit conditions:	······································	🗆 No expiration
Authorized State Agent:: INNI PENS Dat	te: 27412 SEE /	ATTACHED SITE SKETCH

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 esponsible 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

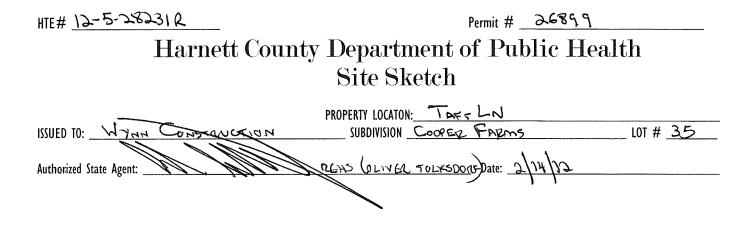
(Required for Building Permit)

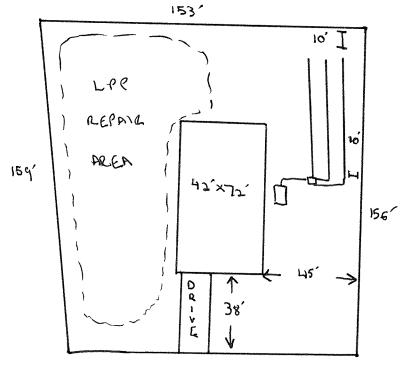
The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .1957, .1958. and .1959 are incorporated by references into this permit and shall be met. Systems shall be installed in accordance with the attached system layout.

ISSUED TO: WYNN CONST	RUCTION	PROPERTY LOCATION:	TAFT	LN	
		SUBDIVISION COOPE			LOT # 35
Facility Type: SFO (4) FACT	New	Expansion I	Repair		
Facility Type: 50 (475-777) Basement? I Yes X No	Basement Fixtures? 🗆 Yes	No .			0
Type of Wastewater System**	15% REDUCTION	SYSTEM		_ (Initial) Wastewater Flow:	<u>360</u> GPD
(See note below, if applicable 🗆)					
<u> </u>	_98	(Repair)			
Installation Requirements/Conditions	Number of tren	iches <u>3</u>		Ø	
Septic Tank Size 1000 gallo	ons Exact length of			irench Spacing:	_ Feet on Center
Pump Tank Size gallo		be installed on contour at a	S	ioil Cover: 12-24	inches
	Maximum Trenc	h Depth of: <u> </u>	inches	(Maximum soil cover shall	not exceed
	(Trench bottom	s shall be level to +/-1/4"		36" above the trench bot	tom)
	in all directions)			
Pump Requirements:ft. T	DH vs GPM				inches below pipe
			1	Aggregate Depth:	inches above pipe
Conditions:					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:	Date:				
This Construction Authorization is subject to revocation in the site plan, plat, or the intended use changes. The Construction Auth					
Construction Authorization is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal	al and to the conditions of this permit. SEE ATTACHED SITE SKETCH	H			
Authorized State Agent:	Date: <u>בן און ב</u> n Expiration Date: <u>בן און ב</u>				





TAFT LN