HTE# 12-5-26334

## Harnett County Department of Public Health **Improvement Permit**

26890

A building permit cannot be issued with only an Improvement Permit				
	PROPERTY LOCA	ATION: SANGRI		Δ 1
ISSUED TO: HVGH SURLES E		WALNUT C		FOL # <del>  ブル</del>
Type of Structure: SFO (48 × 51)	SION 🗆	site improvements req	quired prior to Construction Author	ization issuance:
Proposed Wastewater System Type: PumaTo	25% REOUGTON			
Projected Daily Flow: 360 GPD	_			
Number of bedrooms: 3 Number of Oc	cupants:max			
Basement Yes No	·			
Pump Required: ☐ Yes ☐ No ☐ May be re	quired based on final location and elev	ations of facilities		
	☐ Well Distance from well		Permit valid for:	Five years  No expiration
				•
		^ ^		
Authorized State Agent::	REY-15 Date:	9/3/15	SEE ATT	ACHED SITE SKETCH
The issuance of this permit by the Health Department in no way gu site is subject to revocation if the site plan, plat, or the intended ut the Laws and Rules for Sewage Treatment and Disposal and to condition	se changes. The Improvement Permit shall not be	t holder is responsible for che affected by a change in owne	cking with appropriate governing bodies in ership of the site. This permit is subject to	meeting their requirements. This compliance with the provisions of
	Construction Au	ıthorization		
	(Required for Build			
The construction and installation requirements of Rules .1950, .1952			into this permit and shall be met. Systems	shall be installed in accordance
with the attached system layout.			,	
ISSUED TO: HUGH SURLES BUIL	OERS PROPERT	y location: <u>Sam</u>	GRASS CT	
	SUBDIVISI	ON WALKUT	GROVE	LOT # 2 <sup>2</sup>
Facility Type: SEO (LRX51)	🔀 New 🗆 Expan			
	Fixtures?  Yes  No	onon in the management		
Type of Wastewater System**  Pune Tes		. SE.	(I_:4:4) W,, FI.	310 000
	0-3 78 12 CDUCS 104	N 0 38 (Em	(IIIItiai) wastewater riow:	SGO GPD
(See note below, if applicable $\square$ )	200/0-			
	25% REDUCTION	(Repair)		
Installation Requirements/Conditions	Number of trenches $3$		_	
Septic Tank Size \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	Exact length of each trench	<u>₲</u> feet	Trench Spacing:	Feet on Center
Pump Tank Size gallons	Trenches shall be installed on o		Soil Cover: 12-18	inches
0	Maximum Trench Depth of:		(Maximum soil cover shall i	
	(Trench bottoms shall be level		36" above the trench both	
	•	10 1/-1/4	שט משטיר נווכ נוכווכוו שטנו	.om)
D D	in all directions)			
Pump Requirements:ft. TDH vs	GPM			inches below pipe
			Aggregate Depth:	inches above pipe
Conditions:				inches total
WATER LINES (INCLUDING IRRIGATION) MUS	T RE 10FT FROM ANY PART OF (	SEPTIC SYSTEM OR F	REDVIK VKEV	
		LI TIC SISILIN ON I	LI AIIL AILLA.	
NO UTILITIES ALLOWED IN INITIAL OR REPAIR	VKAIN FIELD AKEA.			
**If applicable: I understand the system type specin	ied is different from the type specifi	ied on the application.	. I accept the specifications of a	this permit.
Owner/Legal Representative Signature:  Date:  This Construction Authorization is subject to revocation if the site plan, plan or the intended use changes. The Construction Authorization shall not be transferred when there is a change in ownership of the site. This				
This Construction Authorization is subject to revocation if the site pla	n, plan or the intended use changes. The Constri	uction Authorization shall not l	be transferred when there is a change in o	wnership of the site. This
Construction Authorization is subject to compliance with the provision				ATTACHED SITE SKETCH
	William			
Authorized State Agent:	May Section	Date:	<u>e</u> ]a] 12	
	Construction Author	rization Expiration D	late: <u>2 2 17</u>	

## Harnett County Department of Public Health Site Sketch

PROPERTY LOCATON: SAN GRASS CT SUBDIVISION WALNUT GROVE ISSUED TO: HUGH Authorized State Agent: MOODED P) = PINE TREE REPAIR ALGA P 48'X51' المحر يحل

80

SAW GRASS CT