HTE#12-528246

Harnett County Department of Public Health

26896

Improvement Permit

		_								
A	building	permit	cannot	be	issued	with	only	an	Improvement	Permit

PROPERTY LOCAT	
	OAKMONT LOT # 8
NEW REPAIR E EXPANSION	Site Improvements required prior to Construction Authorization Issuance:
Type of Structure: SEO (H6757)	
Proposed Wastewater System Type: 2590 REDUCTION SYSTEM	
Projected Daily Flow: 1780 GPD	
Number of bedrooms: <u> </u>	
Basement \Box Yes \bowtie No	
Pump Required: 🗆 Yes 🛛 No 🛛 🖄 May be required based on final location and elevat	
Type of Water Supply: Community Permit conditions:	>♡ feet Permit valid for: X Five years No expiration
	<u> </u>
	SEE ATTACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guarantees the issuance of other permits. The permit site is subject to revocation if the site plan, plat, or the intended use changes. The Improvement Permit shall not be a the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.	holder is responsible for checking with appropriate governing bodies in meeting their requirements. This ffected by a change in ownership of the site. This permit is subject to compliance with the provisions of
Construction Aut	thorization
(Required for Buildi	ng Permit)
The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .1957, .1958. and .1959 are	
with the attached system layout.	
	LOCATION: Docs RD
SUBDIVISIO	N OAKMONT LOT # 8
Facility Type: <u>SFO(46752</u> X New Expansion	ion 🖾 Repair
Basement? 🗆 Yes 🔀 No 🛛 Basement Fixtures? 🗆 Yes 🗶 No	
Type of Wastewater System** 25% REDUCTION SYSTEM	(Initial) Wastewater Flow: <u>480</u> GPD
(See note below, if applicable 🔊	
25% REDUCTION SYSTEM	_(Repair)
Installation Requirements/Conditions Number of trenches	
Septic Tank Size 1000 gallons Exact length of each trench	$\underline{S} \underline{\circ}$ feet Trench Spacing: $\underline{\gamma}$ Feet on Center
Pump Tank Size LOOO gallons Trenches shall be installed on co	ontour at a Soil Cover: $6 - 18$ inches
(IF NEEDED) Maximum Trench Depth of: 18	
(Trench bottoms shall be level to	
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 SI	EPTIC SYSTEM OR REPAIR AREA.
NO UTILITIES ÀLLOWED IN INITIAL OR REPAIR DRAIN FIELD AREA.	
**If applicable: / understand the system type specified is different from the type specified	d on the application. I accept the specifications of this permit.
Owner/Legal Representative Signature:	Date:
Construction Authorization is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and	d Disposal and to the conditions of this permit. SEE ATTACHED SITE SKETCH
W U.I. IV	N
Authorized State Agent: INDEL RE1-15	Date:10/12

Construction Authorization Expiration Date:

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