HTE# REPENCE

Harnett County Department of Public Health

<u>Improvement Permit</u>

27446

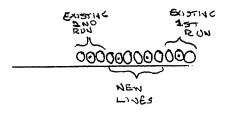
A	building permit cannot be issued with or	nly an Improvement		
ISSUED TO: ANDREW HAYS	PROPERTY LOCATION		JUNO DR	
	SUBDIVISION) NE	LOT # <u>1243</u>
NEW REPAIR EXPANSION Type of Structure: SFD	и L	te improvements req	uired prior to Construction Au	thorization Issuance:
Proposed Wastewater System Type: BED Sys				
Projected Daily Flow: 360 GPD				
Number of bedrooms: Number of Occup	ants: 6 max			** Andrewske dende my
Basement 🗆 Yes 🔀 No	und.			
:	red based on final location and elevation	ns of facilities		
Type of Water Supply: Community Public	☐ Well Distance from well 100	O feet	Permit valid for:	Five years
Permit conditions:				☐ No expiration
		1.1		
Authorized State Agent::		6 13		ATTACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guarasite is subject to revocation if the site plan, plat, or the intended use of the Laws and Rules for Sewage Treatment and Disposal and to condition	hanges. The Improvement Permit shall not be affect			
	Construction Author	orization		
	(Required for Building			
The construction and installation requirements of Rules .1950, .1952, .1			into this permit and shall be met. Sys	tems shall be installed in accordance
with the attached system layout.			,	
ISSUED TO: ANDREW HAYS	DDADEDTV IA	CATION. LALA	June Do	
1330ED 10	I KOLEKIT EO	The Sal	POINTE	LOT # 143
Encillate Turner S. F.C.			101016	LUI # <u>17</u>
Facility Type: 5FD		M Repair		
	ures? 🗆 Yes 🗘 No		/I */* I) *III	300
Type of Wastewater System**	2		(Initial) Wastewater Flo	w: > GPD
(See note below, if applicable □)	en (25% REDUCTION)(R	Tur	IN EXISTING ST	ISTEM INTO
		epair)		. SEE SHE SKETU
Installation Requirements/Conditions	Number of trenches			_
Septic Tank Size gallons	Exact length of each trench		Trench Spacing:	
Pump Tank Size gallons	Trenches shall be installed on conto		Soil Cover:	
	Maximum Trench Depth of:		(Maximum soil cover sha	
	(Trench bottoms shall be level to +	-/-1/4"	36" above the trench b	oottom)
	in all directions)			
Pump Requirements:ft. TDH vs	_ GPM		***************************************	inches below pipe
0 , 0	, 6		Aggregate Depth:	inches above pipe
Conditions: DISCONNECT & HEA	NOON LAST KUN.		<u> </u>	inches total
Conditions: PISCONNECT & ABA SPRING SATURATING BOTTOR	n Line AND LONED	SECTION O	4 YARD SYSTEM	NOT FAILING
VATER LINES (INCLUDING IRRIGATION) MUST E IO UTILITIES ALLOWED IN INITIAL OR REPAIR D	E 10FT. FROM ANY PART OF SEPT			
*If applicable: / understand the system type specified	is different from the type energified	on the application	Laccount the energifications	of this parmit
in applicable. I understand the system type specified	is unicient nom the type specified to	чі іне аррисаціон.	r accept the specifications t	n uns permu.
Owner/Legal Representative_Signature:			Date:	
JWNEr/Legal Representative_Signature: his Construction Authorization is subject to revocation if the site plan, p				in ownership of the site. This
onstruction Authorization is subject to compliance with the provisions of	the Laws and Rules for Sewage Treatment and Dis-	posal and to the condition	ons of this permit. SI	EE ATTACHED SITE SKETCH
			1 1	
authorized State Agent:	RENS	Date:	5/6/3	
<u> </u>	Construction Authorizat	ion Expiration D	ate: EXY	

HTE#	REPRIZ
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Harnett County Department of Public Health Site Sketch

ISSUED TO: A NOREN HAYS	PROPERTY LOCATON: 447 JUNO PR SUBDIVISION TINGEN POINTE LOT # 143
Authorized State Agent:	REAL COLNER TOLKSDORD Date: 563
* FILL SPACE BETWEEN 2 EXISTING LINES WITH G BUNDLES	CONTACT HCHO WITH ANY QUESTIONS POTOR
*FEED ALL 4 PIPES FROM D-BOX	
FRENCH DROIN LIVE TO BE INTALLED BE MENONED AT OR BELOW LAST GREINAL NEWES LINE IF DESIRED FRILING.	HOUSE EXISTING
	PUMP D R I ARCA I L I ARCA I



* 4 PIPES LEAVING D-BOX