HTE#12-5-26732

Harnett County Department of Public Health

Improvement Permit

26988

A building permit cannot be issued with only an Improvement Permit ISSUED TO: SAVY HOMES LLC PROPERTY LOCATION: WIRE RD

SUBDIVISION KENZAN FARMS

LOT # 14 NEW REPAIR DEPARTMENT EXPANSION DEPARTMENT Type of Structure: SFO (50 15) Site Improvements required prior to Construction Authorization Issuance: Proposed Wastewater System Type: 25% REDUCTION 575TEN Projected Daily Flow: 480 GPD Number of bedrooms: Number of Occupants: 8 max Basement TYes 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 100 feet Permit valid for: ☐ No expiration Authorized State Agent:

| Complete | Comple 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: Sensitives | Sensitives | Subdivision | Subdi (See note below, if applicable □) 25% REDUCTION SYSTEM (Repair) Number of trenches 1 Installation Requirements/Conditions Exact length of each trench 340 feet Trench Spacing: ______ Feet on Center Septic Tank Size 1000 gallons Pump Tank Size _____ gallons Trenches shall be installed on contour at a Soil Cover: 8-24 inches Maximum Trench Depth of: 20-36 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: 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: __ This Construction Authorization is subject to revocation 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 the acovisions 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: 4/20/17

Harnett County Department of Public Health Site Sketch

	PROPERTY LOCATON: WIRE RD	
ISSUED TO: SANT HOMES LLC	SUBDIVISION KENLAN FARMS	LOT # <u>\\</u>
Authorized State Agent:	ENS (DZWERZ TO ZKEDOTO) Date: 4/20/12	

WIRE RO 90 STREETSCAPE 15' BUFFER REPAIR AREA 168 HOUSE الرد ، عه 37 Emmp CT