HTE# 12-5-29734

Harnett County Department of Public Health

26990

Im	prov	/emen	it Pe	rmit

A	building	permit	cannot	be	issued	with	only	an	Improvement	Permit
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	PROPERTY LOCATION:	MIREN	ŝ	
ISSUED TO: SAVY HOMES LLC	_ SUBDIVISION	ENILAJ F	FARMS	LOT # 17
NEWX REPAIR ロ EXPANSION ロ Type of Structure: うちつ (ちらっひょち)	Site I	nprovements req	quired prior to Construction Author	
Type of Structure: 5FO (SG'×48)				
Proposed Wastewater System Type: 25%, REDUCTION SYS	TEN			
Projected Daily Flow: 480 GPD				
Number of bedrooms: Number of Occupants:	_max			
Basement 🗆 Yes 🔀 No				
Pump Required: 🗆 Yes 👘 No 🛛 🔀 May be required based on final I	ocation and elevations of	facilities		
Type of Water Supply: 🗆 Community 🛛 Public 🛛 Well Distar	ice from well <u>100</u>) feet	Permit valid for:	Five years
Permit conditions:				No expiration
				•
Authorized State Agent::	NS Date: 4	120/12	SEE ATT	ACHED SITE SKETCH

The issuance of this permit by the Health Department in no way guarantees the issuance of other permits. The permit holder is responsible 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: SAMIN HOMES LZ(PROPERTY LOCATION:	e Ro	
	SUBDIVISION KENZAN	Forms LOT # 17	
Facility Type: 5FO (5(*4)9)	X New □ Expansion □ Repair ixtures? □ Yes X No 260VGT10N SYSTEM		
Basement? 🗆 Yes 🔀 No Basement F	ixtures? 🗆 Yes 🛛 🗙 No		
Type of Wastewater System**	LEDVETION SYSTEM	(Initial) Wastewater Flow: <u>486</u> GPD)
(See note below, if applicable 🔲)			
257, Ka	DUGTION SYSTEM (Repair)		
Installation Requirements/Conditions	Number of trenches	0	
Septic Tank Size 1000 gallons	Exact length of each trench 270 feet	Trench Spacing: <u> </u>	
Pump Tank Size gallons	Trenches shall be installed on contour at a	Soil Cover: <u>6</u> inches	
	Maximum Trench Depth of: <u>18</u> 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 p	oipe
		Aggregate Depth: inches above	
Conditions:		inches t	•••

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 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 when the providers of the Laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit.	TCH					
Authorized State Agent: REHS Date: Date: Date: Date:						

