Harnett County Department of Public Health

HTE# 12-5-26795

Improvement Permit

27055

	annot be issued with only an li	— nprovement Permit		
ISSUED TO: DR HORTON INC	PROPERTY LOCATION: SUBDIVISION			LOT # 18
NEW REPAIR C EXPANSION C			prior to Construction Author	
Type of Structure: <u>SPO (SO'×60')</u>				
Proposed Wastewater System Type: Pune To 25% REOV	401T			
Projected Daily Flow: GPD				
Number of bedrooms: <u>3</u> Number of Occupants: <u>6</u>	max			
Basement Yes No				
Pump Required: Kes INO May be required based on fina Type of Water Supply: Community X Public Well Dis	i location and elevations of fact tanks from well 0	inties feet	Permit valid for:	Five years
Permit conditions:		_ 1001	rennit vanu tor.	\square No expiration
Authorized State Agent::	Date: 5 29	<u>75</u>	SEE ATT/	ACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guarantees the issuance of o site is subject to revocation if the site plan, plat, or the intended use changes. The Improvem	ther permits. The permit holder is resp ant Permit shall not be affected by a c	insible for checking wit	h appropriate governing bodies in	meeting their requirements. This
the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.	int remint shan not be anetted by a c	lange in ownership of	the site. This permit is subject to	compliance with the provisions of
Cons	truction Authoriza	tion		
	lequired for Building Permit)	<u></u>		
The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .19 with the attached system layout.	57, .1958. and .1959 are incorporated	by references into this	permit and shall be met. Systems	shall be installed in accordance
OD Han I		Calder		0
ISSUED TO: DR HORSTON INC	PROPERTY LOCATION:	- Yeret	SS CHURCH	KO
Facility Type: SFO(SOX60) XNew	SUBDIVISION		NNTE	LOT # <u>18</u>
		l Repair		
Basement? \Box Yes No Basement Fixtures? \Box Yes Type of Wastewater System** $P_{U} \sim T_{o} \rightarrow 0$	NO S			215
	NEDUCTION PER	12250 (II	nitial) Wastewater Flow: _	SEO GPD
(See note below, if applicable) Pump To 25% RE				
Installation Requirements/Conditions Number of tre				
•	f each trench 75	feet Trend	:h Spacing: <u>9</u>	Fred on Combin
· · · · · · · · · · · · · · · · · · ·	be installed on contour at a			Feet on Center
• •	ch Depth of: 18			nches
	is shall be level to ± 1.4 "		aximum soil cover shall n 6" above the trench botto	
in all direction			o above the trench botto	, ini)
Pump Requirements:ft. TDH vs GPM	3)			inches below nine
		Δασr	egate Depth:	inches below pipe inches above pipe
Conditions: WETLAND CROSSING MUST	SE DONE IN A	nggn CLORDON	c£.	inches above pipe
Conditions: WETLAND CROSSING MUST & WITH ALL FEDERAL, STATE, & CO	INTY LAWS AN	ID RULES	PERMIT BASE	ED ON Paperson
WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM	ANV DADT OF CEDTIC CVC		ADEA FROM APOL	CANTS LSS,
			AKEA.	
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD AR				
**If applicable: / understand the system type specified is different from	the type specified on the a	pplication. I acce	ept the specifications of th	his permit.
Owner/Legal Representative Signat ure:			Date:	
This Construction Authorization is subject to revocation if the site plan, plat, or the intended us				•
Construction Authorization is appear to compliance with the partitions of the bases and Rules for	r sewage freatment and Disposal and	o the conditions of thi	s permit. SEE A	ATTACHED SITE SKETCH

RENS

Construction Authorization Expiration Date:

Date: 5) 29

29/17

M

Authorized State Agent:

