HTE#<u>12-5-29347</u>

Harnett County Department of Public Health

27018

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|---|---|----|---|----|----|----|---|----|---|----|
| | | | | | | | | | | |

| | | h only an Improvement Permit | | |
|--|-------------|---|---------------------|-----------------|
| PROP | | TION 321448 ATTORNS | | |
| ISSUED TO: Confort / Tomas LAC SUBE | DIVISION | SFETTON | | LOT # <u>12</u> |
| NEW 🗹 🖉 REPAIR 🗆 EXPANSION 🗖 | | Site Improvements required prior to Con | struction Authoriza | tion Issuance: |
| ISSUED TO: <u>Confort Homes</u> <u>Proz</u> SUBI NEW I REPAIR □ EXPANSION □ Type of Structure: <u></u> | | • | | |
| Proposed Wastewater System Type: 25% ZBDUZCO | | | | |
| Projected Daily Flow: <u>368</u> GPD | | | | |
| Number of bedrooms: Number of Occupants: max | | | | |
| Basement Yes No | | | | |
| Pump Required: 🛛 Yes 🛛 No 🗌 May be required based on final location | n and eleva | tions of facilities | | |
| Type of Water Supply: Community Public Well Distance from | m well | feet Perm | nit valid for: | Five years |
| Permit conditions: | | | | No expiration |
| | | | | • |
| 4 | | | | |

Authorized State Agent: SEE ATTACHED 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: Compart Homes Inc. | PROPERTY LOCATION: Fac 14 | 18 ATRES RD |
|---|--|---|
| | SUBDIVISION STETSO | |
| Facility Type: | _ 🗹 New 🔲 Expansion 🔲 Repair | |
| Basement? 🗌 Yes 🗹 No 🛛 Basement Fixtu | | |
| Type of Wastewater System** Manafer to | 250/28Dualow Suster | (Initial) Wastewater Flow: <u>360</u> GPD |
| (See note below, if applicable \Box) | / | · · |
| Monthe to | 2620 Rest Fys Le (Repair) | |
| Installation Requirements/Conditions | Number of trenches | |
| Septic Tank Size <u>/CCO</u> gallons | Exact length of each trench $\underline{60}$ feet | Trench Spacing: Feet on Center |
| Pump Tank Size 1008 gallons | Trenches shall be installed on contour at a | Soil Cover: inches |
| 4 X 1/2 Sch 40 values Pump Requirements:ft. TDH vs | Maximum Trench Depth of: 24 inches (Trench bottoms shall be level to $+/-1/4$ " | (Maximum soil cover shall not exceed 36" above the trench bottom) |
| aparmitican | in all directions) | so above the trench bottomy |
| Pump Requirements:ft. TDH vs | GPM | inches below pipe |
| | | Aggregate Depth: <u>2</u> inches above pipe |
| Conditions: | | inches tota |

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.

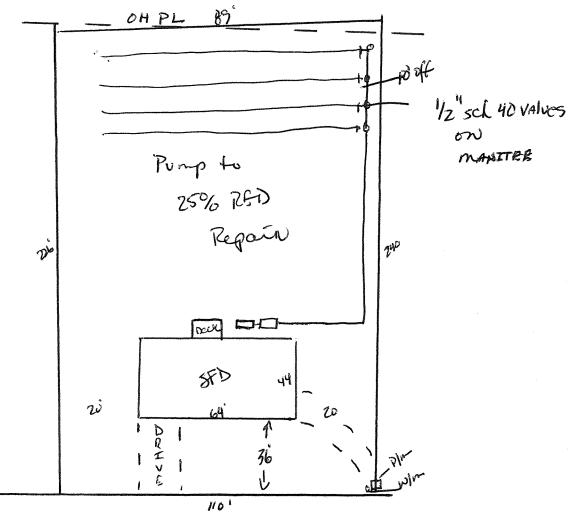
| Owner/Legal Representative Signature: Dat | e: |
|--|--|
| This Construction Authorization is subject to revocation if the site plan, plat, or the intended use changes. The Construction Authorization shall not be transferred when there | e is a change in ownership of the site. This |
| Construction Authorization is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit. | SEE ATTACHED SITE SKETCH |
| Authorized State Agent: Joms & Manhte Date: 7-17 | -1 2 |

| CONSCIENCE AUTOMATION LADIATION DATE. | Construction | Authorization | Expiration | Date: | |
|---------------------------------------|--------------|---------------|------------|-------|--|
|---------------------------------------|--------------|---------------|------------|-------|--|

7-17-17

HTE# <u>12-5-29347</u> Harnett County Department of Public Health Site Sketch

| | PROPERTY LOCATON: <u>ろ</u> ズ | 1448 ATRE | -3120 |
|------------------------------|------------------------------|-----------|-----------------|
| ISSUED TO: Comport Homes Inc | SUBDIVISION | TRISON | LOT # <u>12</u> |
| Authorized State Agent | hat ens | Date: | 7-7-12 |



MOONLight D.2.