HTE# 12-5-29350

## Harnett County Department of Public Health

Improvement Permit

27020

	A building permit cannot be issued	with only an Improvement OCATION: FR 1708	Permit M=16a 01	
ISSUED TO; KEN DAWSON itomes	SUBDIVISION	BITES MELLE	W (4)(3)	LOT # 6
NEW ☑ REPAIR □ EXPANS	ION 🗆		uired prior to Construction Author	
Type of Structure:			•	
Proposed Wastewater System Type: 25% 1280 L	CROW Systas			
Projected Daily Flow: GPD	,	<del> </del>	· · · · · · · · · · · · · · · · · · ·	
Number of bedrooms: Number of Occ Basement ☐ Yes ☐ No	upants: <u> </u>			
Basement Yes Mo				
	uired based on final location and el			<b>_</b>
Type of Water Supply: ☐ Community ☑ Public	☐ Well Distance from well	teet	Permit valid for:	Five years
Permit conditions:				☐ No expiration
•				
Authorized State Agent:	fullistat Date:	7-18-	IZ SEE AT	TACHED SITE SKETCH
The issuance of this permit by the Health Department in no way gua	<b>y</b>	•		
site is subject to revocation if the site plan, plat, or the intended use	•	be affected by a change in owner	rship of the site. This permit is subject t	o compliance with the provisions of
the Laws and Rules for Sewage Treatment and Disposal and to condit	ons of this permit	·		
	C			
	Construction A	<u>lutnorization</u>		
	(Required for Bu	ilding Permit)		
The construction and installation requirements of Rules .1950, .1952, with the attached system layout.	.1954, .1955, .1956, .1957, .1958. and .1959	9 are incorporated by references	into this permit and shall be met. Syster	ns shall be installed in accordance
ISSUED TO: KELL DANSON HO	DRADEI	RTV LOCATION: SV 176	8 Maile AN	
ISSUED TO: KEN DANSON Hor Facility Type: SFO Basement? ☐ Yes ☑ No Basement F	/ CHIDNIV	ICION STORE A	To present	LOT # <u>6</u>
Facility Types	Now DEVE	ansian Danair	uroc	LUI # <u></u>
Parameter Street	Le New L Exp	ansion $\square$ nepair		
Dasement: Lifes Lino Dasement F	xtures: Li ies Lizino	- <i>c</i> -	(h.:/:-1) W/	3/. A can
Type of Wastewater System** 25% 123	* DV G CON Syst	75-	(Initial) wastewater flow	<u>360</u> GPD
(See note below, if applicable □)	-4 250 Des 5	(0:-\		
1 min by 10 line	Number of trenches Z	so (Bepair)		
	Number of trenches		· · · · · ›	F
Septic Tank Size 1000 gallons	Exact length of each trench Trenches shall be installed on	120 teet	Irench Spacing:	_ Feet on Center
Pump Tank Size gallons			Soil Cover:	inches
	Maximum Trench Depth of: _a		(Maximum soil cover shall	
	(Trench bottoms shall be leve	el to +/-1/4"	36" above the trench bo	ttom)
	in all directions)		4	
Pump Requirements:ft. TDH vs	GPM			inches below pipe
			Aggregate Depth:	inches above pipe
Conditions:				/Z inches total
WATER LINES (INCLUDING IRRIGATION) MUST	BE 10FT, FROM ANY PART OF	SEPTIC SYSTEM OR I	REPAIR AREA.	
NO UTILITIES ALLOWED IN INITIAL OR REPAIR				
**If applicable: / understand the system type specifi	ed is different from the type spec	cified on the application	. I accept the specifications of	this permit.
			_	
Owner/Legal Representative Signature:			Date:	
Construction Authorization is subject to compliance with the provisions	of the Laws and Kules for Sewage Treatment	and Disposal and to the condit	ions or this permit. <b>SC</b> I	ATTACHED SITE SKETCH
Authorized State Agent:	M 1. 10		7-18-12	
Authorized State Agent:	1010 month	· I)ate·	1-10-12	•

Construction Authorization Expiration Date:

## Harnett County Department of Public Health Site Sketch

	PROPERTY LOCATON: SC178 MILLEUKS
ISSUED TO: Ken DAWSON Homes INC	SUBDIVISION OTILS VM /10a LOI # 6
Authorized State Agent Janes I Manhon	A TE 7848. Date: 7-18-12
O	<b>%</b>
FOR NOT RUN  DRATULINES  UNDER OVER HEAD  POWERLINES  NEW OR OID LIVE  LOCATION  * POLES AND LINES  ARE CLEARLY MARKED  TRON  TRON  IG OFF PIL	<b>%</b> <sup>6</sup>
WITH FUTURES DOWN	86 k NED Jyston to
Homeonaer PIL TO Be 10066 10006 10006 10006 10000 10000 10000 10000 10000 10000 10000 10000 10000 10000 10000 10000 10000 100000 100000 100000 100000 100000 100000 1000000	Repart Be Vosoble in Septic tosist.
Of TROW	EXESTENCY
o-water merca	DRIVEWAY