HTE# 12-5-29455

Harnett County Department of Public Health

Improvement Permit

27128

A bui	Iding permit cannot be issued with	n only an Improvement F	ermit	
ISSUED TO: Stancil Builder Inc	SUBDIVISION	Movfer fie		LOT # 45
NEW REPAIR . EXPANSION			ired prior to Construction Author	
Type of Structure: 5FD 48 x 42'			•	
Proposed Wastewater System Type: Punp +025	lo leduction lystem	•		
Projected Daily Flow: 360 GPD	(
Number of bedrooms: Number of Occupant Basement □Yes □ No	s:max			
	based on final location and eleva	tions of facilities		
	Well Distance from well		Permit valid for:	✓ Five years☐ No expiration
		//		,
Authorized State Agent: Luga Rebaix	CENT Date:	8/24/2012	- SEE ATT	ACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guarantees site is subject to revocation if the site plan, plat, or the intended use chang the Laws and Rules for Sewage Treatment and Disposal and to conditions of	the issuance of other permits. The permit ges. The Improvement Permit shall not be	holder is responsible for check affected by a change in owners	ing with appropriate governing bodies in	meeting their requirements. This
	Construction Au	thorization		
	(Required for Build			
The construction and installation requirements of Rules .1950, .1952, .1954, with the attached system layout.			to this permit and shall be met. System:	s shall be installed in accordance
ISSUED TO: Stancil Builder Inc	PROPERTY SUBDIVISIO	LOCATION: _ Ch	alybeate Rd.	
			eld	LOT # <u>45</u>
Facility Type: S No Basement Fixture	New Expans	sion 🗆 Repair		
Basement? Yes No Basement Fixture	es? Yes No 1. Reduction System	_	(Initial) Wastewater Flows	フ6º GPD
(See note below if applicable [])	•		(IIIItiai) wastewater riow.	UD UD
(See note below, if applicable)	Reduction System	(Renair)		
Installation Requirements/Conditions	Number of trenches 2	(/		
	Exact length of each trench	/50 feet	Trench Spacing: 9	Feet on Center
	Frenches shall be installed on c		, , ,	inches
•	Maximum Trench Depth of:	ර්·24 inches	(Maximum soil cover shall	not exceed
	Trench bottoms shall be level t		36" above the trench bot	tom)
i	n all directions)			
Pump Requirements:ft. TDH vs	GPM			inches below pipe
Conditions: Drain lines to be instal	led in earenest	For lot 45	_Aggregate Depth:	inches above pipe inches total
WATER LINES (INCLUDING IRRIGATION) MUST BE				
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRA				
**If applicable: / understand the system type specified is	different from the type specifi	ed 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				
Construction Authorization is subject to compliance with the provisions of th	e Laws and Rules for Sewage Treatment ar	nd Disposal and to the condition	ns of this permit. SEE	ATTACHED SITE SKETCH
Authorized State Agent: Suga Man	in REHS	Date: _	8/24/2012	
	Construction Author	rization Expiration Da	ate: 8/24/2017	

HTE#	12-5-29455
MIC#	100 01100

Permit # _____27/28

Harnett County Department of Public Health Site Sketch

	PROPERTY LOCATION: Chalybeate Rd.				
ISSUED TO: 5ta	nc. 1 Boilder Inc	SUBDIVISION Dext	erfield / /	LOT # _ <i>45</i>	
Authorized State Agent: 4			Date: 8/24/2		
Authorized state Agent.	<i>,</i> - · ·		Fasement lit 45	for	
334	Howe	235	Fasement 1st 415 52' 107 107 107 107 107 107 107 10	770	
	35	D R F V C			
	Alvis Cou	rt.			