HTE# 12-5-295))

Harnett County Department of Public Health

Improvement Permit

27100

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: CHORCESS CHURCH RD				
ISSUED TO: DRHORTON INC	PROPERTY LOCA SUBDIVISION	TION: <u>Croress</u> Croress	POINTE POINTE	tot #
NEW REPAIR □ EXPANSION			uired prior to Construction Author	
Type of Structure: SED (6) 38	. П	site improvements req	uned prior to construction Author	ization issuance.
Proposed Wastewater System Type: Pure To 259	O REDUCTION			
Projected Daily Flow: 48 GPD GPD	3,0,1,3,1			
Number of bedrooms: Number of Occupa	ants: 8 max			
Basement Yes No				
Pump Required: □XYes □ No □ May be required	ed based on final location and eleva	tions of facilities		
Type of Water Supply: Community Public Permit conditions:			Permit valid for:	Five years
Termit conditions.				☐ No expiration
Authorized State Agent::	RENTS Date:	21/25/18	SEE ATT	TACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guarant site is subject to revocation if the site plan, plat, or the intended use che Laws and Rules for Sewage Treatment and Disposal and to conditions	ees the issuance of other permits. The permit anges. The Improvement Permit shall not be a	holder is responsible for che	cking with appropriate governing bodies in	meeting their requirements. This
	Construction Au	thorization		
	(Required for Buildi			
The construction and installation requirements of Rules .1950, .1952, .19 with the attached system layout.			into this permit and shall be met. Systems	shall be installed in accordance
ISSUED TO: DRHONON INC	PROPERTY SUBDIVISIO	LOCATION:	rass Church Ro	>
(0.000)	SUBDIVISIO		POINTE	TO1 # 50
Facility Type: SFD (61×38)	_ 📉 New 🖂 Expans	ion 🗆 Repair		
Basement? Yes No Basement Fixtures? Yes No				
Type of Wastewater System** Pump To	25% REDUCTION	3757EM	(Initial) Wastewater Flow:	480 GPD
(See note below if applicable X)			,	
Pump To 2	5% REDUCTION	_(Repair)		
Installation Requirements/Conditions	Number of trenches 1	(1 /		
Septic Tank Size gallons	Exact length of each trench 3	Feet feet	Trench Spacing:	Feet on Center
Pump Tank Size \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Trenches shall be installed on co			inches
tump tum size guions	Maximum Trench Depth of:		(Maximum soil cover shall	
	•		,	
	(Trench bottoms shall be level to	D T/-1/4	36" above the trench both	rom)
D	in all directions)			
Pump Requirements:ft. TDH vs	_ GPM			inches below pipe
A			Aggregate Depth:	
Conditions:				inches total
WATER LINES (INCLUDING IRRIGATION) MUST B	E 10FT. FROM ANY PART OF SI	EPTIC SYSTEM OR R	EPAIR AREA.	
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DI				
**If applicable: I understand the system type specified is different from the type specified on the application. I accept the specifications of this permit.				
vner/Legal Representative Signature: Date:				
to the struction 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 with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit.				
		_	-1-1	
Authorized State Agent: Date: 8 27 12				
Construction Authorization Expiration Date: 8 > 17				

Harnett County Department of Public Health Site Sketch

