HTE# 12-5-29699 Harnett County Department of Public Health

Improvement Permit

27050

| | A building permit ca | | h only an Improvement | Permit Cokashung RA | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|------------------------|--------------------------------------------------------------------------|-------------------------------------------|--------------------------------------------------|
| ISSUED TO: STANCEL Burble | as toc | SUBDIVISION | Consiser | La Bonk | LOT # 49 |
| | ANSION 🗆 | | Site Improvements required prior to Construction Authorization Issuance: | | |
| Proposed Wastewater System Type: 25-20 12 | EDV COZO | | | | |
| Projected Daily Flow: 340 GPD | , | | , | | |
| · / | Occupants: | max | | | |
| Basement □Yes ☑ No □ May be Pump Required: ☑Yes □ No □ May be | required based on final | Llocation and alou | tions of facilities | | |
| | e required based on fina blic Well Dist | | feet | Permit valid for: | Five years No expiration |
| | Madage | Le . | <u> </u> | .19 | |
| Authorized State Agent:: The issuance of this permit by the Health Department in no way site is subject to revocation if the site plan, plat, or the intende the Laws and Rules for Sewage Treatment and Disposal and to co | d use changes. The Improveme | | | ecking with appropriate governing bodies | |
| | Cons | truction Au | thorization | | |
| | <u>(</u> | Required for Build | ing Permit) | | |
| The construction and installation requirements of Rules .1950, .1 with the attached system layout. | 952, .1954, .1955, .1956, .19 | 57, .1958. and .1959 a | re incorporated by references | into this permit and shall be met. System | ms shall be installed in accordance |
| ISSUED TO: STANCY BURKLE | IN FAIT | PROPERT | LOCATION: SR / | 403 Cotheshen | 123 |
| | | SUBDIVISI | 1 LOCATION: <u>SR 1</u> ON <u>Collusber</u> | sonk o | LOT # <u>4</u> 5 |
| Facility Type: 5Fb | Mew | | | | • |
| | nt Fixtures? 🗌 Yes | No | _ 1 | | |
| Type of Wastewater System** | te 250% | 128/1/1016 | 20-SystD | (Initial) Wastewater Flow | : <u>560 </u> |
| (See note below, if applicable □) | to 25% | PENUUL nches Z | (Repair) | | |
| Installation Requirements/Conditions | maniber of tre | | | 0 | |
| Septic Tank Size // DOD gallons | | f each trench _ | | Trench Spacing: | Feet on Center |
| Pump Tank Size/&& & gallons | | be installed on o | | Soil Cover: | inches |
| | | ch Depth of: 💆 | | (Maximum soil cover shall | |
| | , | ns shall be level | to +/-1/4" | 36" above the trench bo | ottom) |
| D B 6. TDH | in all direction | is) | | /. | s inches balancains |
| Pump Requirements:ft. TDH vs | GPM | | | Aggragata Danthi | inches below pipe |
| Conditions: | | | | Aggregate Depth: | 12 inches total |
| | UST BE 10FT. FROM | ANY PART OF S | SEPTIC SYSTEM OR | REPAIR AREA. | |
| NO UTILITIES ALLOWED IN INITIAL OR REP | | | | | |
| **If applicable: / understand the system type sp | ecified is different from | n the type specifi | ied on the application | . I accept the specifications of | f this permit. |
| Owner/Legal Representative Signature: | | | | Date: | |
| Owner/Legal Representative Signature: This Construction Authorization is subject to revocation if the situ | | | | | |
| Construction Authorization is subject to compliance with the prov | risions of the Laws and Rules f | or Sewage Treatment a | nd Disposal and to the condit | ions of this permit. SE | E ATTACHED SITE SKETCH |
| Authorized State Agent: | 5 MANho | nte | Date: | 9-18-17 | ************************************** |

Construction Authorization Expiration Date: __

Harnett County Department of Public Health Site Sketch

PROPERTY LOCATON: 511403 Cokesbury RD

ISSUED TO: STANCE! BUEKLES THE SUBDIVISION Cakesbury Rank LOT # 45

Authorized State Agent Date: 9-18-12

