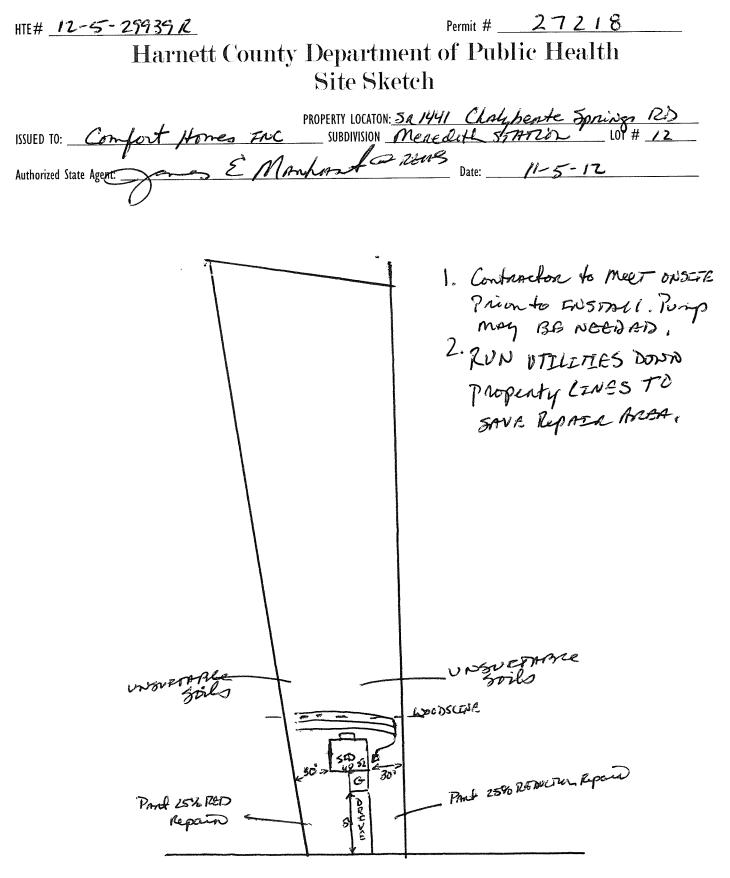
	Harnett	County	Department	of	Public	Health
Improvement Permit						

HTE# 12-5-2993917

27218

	<u>improvement i ernit</u>	
A building per	mit cannot be issued with only an Improvement	
	PROPERTY LOCATION: STLI441	Chalepecto, Springs RD
ISSUED TO: Confort Homes	subdivision Menedelt	577700 LOT # 12
NEW REPAIR EXPANSION	Site Improvements requ	uired prior to Construction Authorization Issuance:
Type of Structure:SFS		- 69-
Proposed Wastewater System Type: 25% READED S	<u>ysten</u>	
Projected Daily Flow: GPD	•	
Number of bedrooms: Number of Occupants:	🖻 max	
Basement Yes No	- · · · · · · · · · · · · · · · · · · ·	······································
	n final location and elevations of facilities	
Type of Water Supply: Community Public U Well	Distance from well feet	Permit valid for: Five years
Permit conditions: <u>Contractor to</u> p	cest on serte	No expiration
Church to ENST	Ht.,	
Authorized State Agent	Date: 11-5-12	Z. SEE ATTACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guarantees the issuan		
site is subject to revocation if the site plan, plat, or the intended use changes. The Im		
the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permi		
C	onstruction Authorization	
<u> </u>		
	(Required for Building Permit)	
The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .19 with the attached system layout.	16, .1957, .1958. and .1959 are incorporated by references in	nto this permit and shall be met. Systems shall be installed in accordance
		1
ISSUED TO: Confort Hongs	PROPERTY LOCATION: <u>In 199</u>	11 Chalperte Spring RS
ľ	/ SUBDIVISION Meredit	
Facility Type:SFD 🛛	New 🖵 Expansion 🗆 Repair	
Basement? Yes No Basement Fixtures?		
Type of Wastewater System** <u>25% NENUCLON Sy</u>	stor	(Initial) Wastewater Flow: <u>360</u> GPD
(See note below, if applicable)	F	
25% REAVER 3	y stB(Repair)	
•	of trenches 3	
• • • • • • • • • • • • • • • • • • •	gth of each trench <u>100</u> feet	Trench Spacing: Feet on Center
ů – Č	shall be installed on contour at a	
,	A- A.M	
	Trench Depth of: 20 -> 18 inches	(Maximum soil cover shall not exceed
-	bottoms shall be level to $+/-1/4$ "	36" above the trench bottom)
in all dir	actions)	,
Pump Requirements:ft. TDH vs GPM		inches below pipe
		Aggregate Depth: <u>2</u> inches below pipe
Conditions: Contractor to m	LET MOSTE Prin	12 inches total
tostaci		
WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. F	ROM ANY PART OF SEPTIC SYSTEM OR R	FPAIR ARFA
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIEL		
NU UTILITIES ALLOWED IN INITIAL UK KEFAIK DRAIN FIEL	ν ΑΝΣΑ.	
**If applicable: / understand the system type specified is differen	t from the type specified 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, or the inte	nded use changes. The Construction Authorization shall not be	
Construction Authorization is subject to compliance with the provisions of the Laws and		
Authorized State Agent.	<u>Construction</u> Authorization Expiration Date:	11-5-7
Authorized State Agent: Jones C/1014	Date: Date:	1. J I Com
ν	Construction Authorization Expiration Da	ate: <u>11-5-17</u>



Meredith LANG.