HTE# 12-5-39966 Harnett County Department of Public Health 23249

Improvement Permit

	iprovenient remit		
A building permit ca	nnot be issued with onl <u>y an Im</u> prov		
	PROPERTY LOCATION:	GEN KOAD	
ISSUED TO: BILL CLARX HOMES	SUBDIVISION PATTONS	5 POINT	LOT # 23
NEW 😹 REPAIR 🗆 EXPANSION 🗖		ents required prior to Construction Authoriz	zation Issuance:
Type of Structure: BFD (54~~52)		• •	
Proposed Wastewater System Type: 25% REDUCTION			
Projected Daily Flow: 360 GPD	φυσταλ.		
Number of bedrooms: <u>S</u> Number of Occupants: <u>S</u>	max	,	
Basement 🗆 Yes 🗆 No			
Pump Required: 🗆 Yes 🗆 No 🛛 🗙 May be required based on final	location and elevations of facilities		
Type of Water Supply: Community Public Well Dist	ance from well 100 fe	et Permit valid for:	🗆 Five years
Permit conditions:			No expiration
			La No expiration
1/1 10			
Authorized State Agent:	nu ulalia		CHED CHE CHETCH
		V	ACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guarantees the issu	ance of other permits. The meremitanoid	ter is responsible for checking with appropriate	governing bodies in meeting
their requirements. This site is subject to revocation if the site plan, plat, or the reprint is subject to compliance with the provisions of the Laws and Rules for Sewag	ended use changes. The improvement r	fermit shall not be anected by a change in ow	nership of the site. This
permit is subject to compliance with the provisions of the taws and rules for seway	e rreatment and Disposal and to condi	tions of this permit.	
	• A B • •		
Const	ruction Authorizatio	n	
/P	equired for Building Permit)		
The construction and installation requirements of Rules .1950, .1952, .1954, .1955,		cornerated by references into this permit and s	hall he met Sucteme chall he
installed in accordance with the attached system layout.	1/30, .1/31, .1/30. and .1/3/ are me	corporated by references into this permit and s	nan be met. systems shan be
ISSUED TO: BILL CLARK HOMES	PROPERTY LOCATION.	TINGEN ROAD	
1330ED 10CITC CTTC T 101112		TINGLA TOTAL	107 4 0 0
	SUBDIVISION PATTO		LOT # <u>23</u>
Facility Type: SFD (54*~53) X New		Repair	
Basement? 🗆 Yes 📉 No Basement Fixtures? 🗆 Yes 🖄 No			
Type of Wastewater System** 25% REDUCTION	_(Initial) Wastewater F	low: <u>360</u> GPD	
(See note below, if applicable [])	_()		
25% CEDUCTION	(Repair)		
	(ncpan)		
Installation Requirements/Conditions			
	1× ma	G	
Septic Tank Size 1000 gallons Exact length o	f each trench 120	feet Trench Spacing:	Feet on Center
Pump Tank Size 1000 gallons Trenches shall	be installed on contour at a	Soil Cover: 12-18 i	nches
(IF NEEDED) Maximum Iren	ch Depth of: <u>24-30</u> i		not exceed
	is shall be level to $+/-1/4$ "	36" above the trench bott	
•		Ju above the trench both	omy
in all direction	S)		
Pump Requirements:ft. TDH vs GPM			inches below pipe
		Aggregate Depth:	inches above pipe
Conditions:			inches total
			• ,• • • ,• •,
**If applicable: I understand the system type specified is d	fferent from the type specified of	on the application. I accept the specifi	cations of this permit.
Owner/Legal Representative Signature:		Date:	
This Construction Authorization is subject to revocation if the strengtan plat, or the	intended use changes. The Construction	Authorization shall not be transferred when th	ere is a change in ownership
of the site. This Construction Anthropization is subject to compliance with the provision	ns of the Laws and Rules for Sewage T	reatment and Disposal and to the conditions o	f this permit.
IHIM M	5	SEE ATT	ACHED SITE SKETCH
Authorized State Agent:	PENS		
Authorized State Agent:	ALLIUS	Date: <u>וו</u> קרות tion Date: <u>ר</u> ור לוו	
Cor	struction Authorization Expira	tion Date: <u>ון רו רו</u>	
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