HTE#13-5-30342R Harnett County Department of Public Health

25543

Improvement Permit

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: Docs Ro ISSUED TO: WYNN CONSTRUCTION SUBDIVISION TRATIERS RIOGE LOT # NEW A REPAIR D EXPANSION D
Type of Structure: NEW 🔀 Site Improvements required prior to Construction Authorization Issuance: Proposed Wastewater System Type: 25% REDUCKIUN Projected Daily Flow: 360 GPD Number of bedrooms: Number of Occupants: Basement □Yes ➤ No ☐ No May be required based on final location and elevations of facilities Pump Required: ☐Yes Type of Water Supply:

Community Public

Well Distance from well Foo feet Permit conditions: ☐ No expiration RGHS_ Date: _ Authorized State Agent:: _ SEE ATTACHED SITE SKETCH The issuance of this permit by the Health Department in no way guarantees the issuance of other permits. The permit holder 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 intended use changes. The Improvement Permit shall not be affected by a change in ownership of the site. This permit is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit. REVISED 4)23/13 Construction Authorization (Required for Building Permit) The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .1957, .1958. and .1959 are incorporated by references into this permit and shall be met. Systems shall be installed in accordance with the attached system layout. ISSUED TO: WYNN CONSTRUCTION PROPERTY LOCATION: DOCS RO
SUBDIVISION TRATTERS RIGGE Facility Type: SFO (37 X52) 49'AT) New Expansion Repair Basement Fixtures? Tes X No

25% REDUCTION SYSTEM (Initial) Wastewater Flow: 360 GPD Basement? Yes Type of Wastewater System** (See note below, if applicable □) 25% REDUCTION SYSTEM (Repair) Installation Requirements/Conditions Number of trenches ______ Septic Tank Size 1009 gallons Exact length of each trench 200 Pump Tank Size gallons Trenches shall be installed on contour at a Maximum Trench Depth of: R inches (Maximum soil cover shall not exceed (Trench bottoms shall be level to +/-1/4" 36" above the trench bottom) in all directions) Pump Requirements: ______ft. TDH vs. ____ GPM _____ inches below pipe Aggregate Depth: ______ inches above pipe __ inches total **If applicable: I understand the system type specified is different from the type specified on the application. I accept the specifications of this permit. Owner/Legal Representative Signature: __ This Construction 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 success to compliance with the provision of this permit. SEE ATTACHED SITE SKETCH Authorized State Agent: Construction Authorization Expiration Date: REVISED 4/23/13 BEN-35

Harnett County Department of Public Health Site Sketch



