HTE# 13-5-30515

Harnett County Department of Public Health

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A Duniding	permit cannot	be issued	with only	an improvement per	mit
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PROPERTY	LOCATION:	Docs	Ì
INVILNI	LUCATION.		

ISSUED TO: WYNN CONSTRUCTION LLC SUBDIVISION	TROTIERS	RIDGE	LOT # GC
NEW 🛛 REPAIR 🗆 EXPANSION 🗆	Site Improvements r	equired prior to Construction Author	
Type of Structure: SFO (57'×37')	•		
Proposed Wastewater System Type: Pume To 25°Lr REDUCTION			
Projected Daily Flow: GPD			
Number of bedrooms: <u>3</u> Number of Occupants: <u>6</u> max			
Basement 🗆 Yes 🔀 No			
Pump Required: Effes 🗌 No 🔲 May be required based on final location and eleva	tions of facilities		•
Type of Water Supply: 🗆 Community 🔀 Public 🗆 Well Distance from well 🔄	100 feet	Permit valid for:	Five years
Permit conditions:			No expiration
Authorized State Agent:: Date:			ACHED 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 d	hecking 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 a the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.	iffected by a change in ow	nership of the site. This permit is subject to	compliance with the provisions of
the cars and rules for seriage requirent and pisposal and to conditions of this perint.			
		·····	<u></u>
Construction Aut	thorization		

(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: WYMM CONSTRUCT	ON LLC PROPERTY LOCATION: DO	cs PD
$\langle \rangle$	SUBDIVISION TROTTERS	RIDGE LOT # 69
Facility Type: SED (47×37)	🛛 New 🔲 Expansion 🗆 Repair	
Basement? Ves No Basement F Type of Wastewater System**	ixtures? 🛄 Yes 🖄 No	
Type of Wastewater System** Pumeric	25% REDUCTION	(Initial) Wastewater Flow: <u>360</u> GPD
(See note below, if applicable \Box)		
PUMETO	25% REDUCTION (Repair)	
Installation Requirements/Conditions	Number of trenches	
Septic Tank Size <u>1000</u> gallons	Exact length of each trench <u>180</u> feet	Trench Spacing: Feet on Center
Pump Tank Size 🔪 🔿 🔿 🔿 gallons	Trenches shall be installed on contour at a	Soil Cover: <u>6-18</u> inches
	Maximum Trench Depth of: <u>18-30</u> 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
Conditions:		inches total

WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM ANY PART OF SEPTIC SYSTEM OR REPAIR AREA. NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD AREA.

**If applicable: / 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:	Date:						
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 t	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.	SEE ATTACHED SITE SKETCH						
Authorized State Agent: Date:	78						

