HTE# 13-5-30613

Harnett County Department of Public Health

Improvement Permit

27278

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: QoG≤ ISSUED TO: H+1-1 CONSTRUCTORS SUBDIVISION OAKMONT NEW X Site Improvements required prior to Construction Authorization Issuance: Type of Structure: _ SEO (547461) Proposed Wastewater System Type: 25% REDUCTION Projected Daily Flow: 606 GPD Number of bedrooms: 5 Number of Occupants: _______max Basement TYes Pump Required: □Yes ➤ No ☐ May be required based on final location and elevations of facilities Type of Water Supply:

Community

Public

Well Distance from well 100 feet Five years Permit valid for: Permit conditions: ☐ No expiration The issuance of this permit by the Health Department in no way guarantees the issuance of the issuance of this permit by the Health Department in no way guarantees the issuance of the issuance of this permit by the Health Department in no way guarantees the issuance of the issuance of this permit by the Health Department in no way guarantees the issuance of the issuance of this permit by the Health Department in no way guarantees the issuance of the issuance of this permit by the Health Department in no way guarantees the issuance of the issuance of this permit by the Health Department in no way guarantees the issuance of the issuance of this permit by the Health Department in no way guarantees the issuance of the issuance of this permit by the Health Department in no way guarantees the issuance of the issuance of this permit by the Health Department in no way guarantees the issuance of this permit by the Health Department in no way guarantees the issuance of the issuance of this permit by the Health Department in no way guarantees the issuance of the is the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit. **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: H+H CONSTRUCTORS PROPERTY LOCATION: DOCS RO Facility Type: SFO (54 × 61)

New Expansion Repair

Basement? Yes No Basement Fixtures? Yes No

Type of Wastewater System** ASYO REOUCTION SYSTEM (Initial) Wastewater Flow: 600 GPD (See note below, if applicable \square) Installation Requirements/Conditions Number of trenches Exact length of each trench 300 feet Trench Spacing: 9 Feet on Center Septic Tank Size 1250 gallons Soil Cover: 24-6 inches Pump Tank Size _____ gallons Trenches shall be installed on contour at a Maximum Trench Depth of: 36-18 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 Conditions: DONOT USE STEROOMNS-USE DEPTH TORUS ONE inches above pipe 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: 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 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: Construction Authorization Expiration Date: 2)

Harnett County Department of Public Health Site Sketch

Authorized State Agent:

PROPERTY LOCATON: Docs Ro

SUBDIVISION DECEMBER TOLKSDORD

Date: 2) 23 13

