HTE# 13-5-30614

Harnett County Department of Public Health

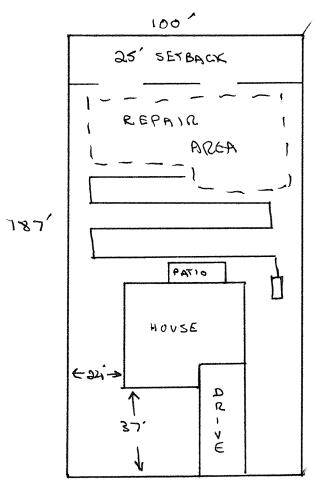
Improvement Permit

27267

A building permit cannot be issued with only an Improvement Permit	
ISSUED TO: H+H COMSTOUCK ORS SUBDIVISION OAKMONT	251 11 701
SSUED TO:	LOT # 139
Type of Structure: SEO (55 \sqrt{55})	ation issuance:
Proposed Wastewater System Type: 25% REOUTH ON	
Projected Daily Flow: 600 GPD	
Number of bedrooms: Number of Occupants: 10 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 Distance from well 100 feet Permit valid for: Permit conditions:	Five years No expiration
Authorized State Agent:: Date: 2/19/13 SEE ATTAC	THEN CITE CHETCH
Authorized State Agent:: 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 m	CHED SITE SKETCH
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 co	mpliance with the provisions of
the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.	r
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 sl	nall be installed in accordance
with the attached system layout.	
ISSUED TO: H+H CONSTRUCTORS PROPERTY LOCATION: Docs Ro	
SUBDIVISION OREMOST	LOT # 13 9
Facility Type: SED (SE 752) SUBDIVISION OATMONT Repair	LUI # <u>!~ 1</u>
Basement? Yes No Basement Fixtures? Yes No	
Type of Wastewater System** 25% REDUCTION System (Initial) Wastewater Flow:	(00 000
(See note below, if applicable \square)	GPD GPD
25% REDUCTION (Repair)	
Installation Requirements/Conditions Number of trenches	
(Trench bottoms shall be level to +/-1/4" 36" above the trench botto	m)
in all directions)	
Pump Requirements:ft. TDH vs GPM	inches below pipe
Aggregate Depth:	
Conditions: DO NOT USE STEPROWNS - USE DEPTH TO RUN	inches total
DNE CONTINUOUS LINE.	
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 the	is 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 there is a change in own	·
Construction Authorization is source the compliance with the providing the laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit.	ITACHED SITE SKETCH
Authorized State Agent: Date: 2 19 3	

Harnett County Department of Public Health Site Sketch

		PROPERTY LOCATON: DOCS R	D	
ISSUED TO: _	H+H COMSTRUCTORS	SUBDIVISION OAKMONS	LO	1# 139
		,		
Authorized Sta	ite Agent:	ENS (OLIVER TOLKSDORF) Date:	2/19/13	
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