Harnett County Department of Public Health

27428

lm	provement	Permit

A building permit cannot be issued with only an Improvement Peri	A	building	permit	cannot	be	issued	with	only	an	Improvement	Perm
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PROPERTY	LOCATION: WIRE RD	
ISSUED TO: <u>SAVY HOMES LLC</u> SUBDIVISIO	N KENLAN FARMS	LOT # 65
NEW REPAIR C EXPANSION	Site Improvements required prior to Construction Authorization	
Type of Structure: 50 (65×65)		
Proposed Wastewater System Type: 25% REDUCTION SYSTEM		
Projected Daily Flow: 480 GPD		
Number of bedrooms: Number of Occupants: max		
Basement IVes No		
Pump Required: 🗆 Yes 📉 No 🔅 May be required based on final location and		- 1
Type of Water Supply: Community Public Well Distance from well Permit conditions:	· · · · · · · · · · · · · · · · · · ·	Five years
	L	\Box No expiration
1111		
Authorized State Agent::	e: 4 23 13 SEE ATTACHED) SITE SKETCH
The issuance of this permit by the Health Department in no way guarantees the issuance of super permits. The p	permit holder is responsible for checking with appropriate governing bodies in meetin	or their requirements. This
site is subject to revocation if the site plan, plat, or the intended use changes. The Improvement Permit shall no	t be affected by a change in ownership of the site. This permit is subject to complia	ince with the provisions of
the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.		
Construction	Authorization	······
<u>Construction</u>		
(Required for B		
The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .1957, .1958. and .19 with the attached system layout.	59 are incorporated by references into this permit and shall be met. Systems shall b	e installed in accordance
ISSUED TO: SAVRY HOMES LLC PROPI	ERTY LOCATION: WIDE RD VISION KENZAN FARMS	
SUBDI	VISION KENZAN FARMS	_ LOT # <u>65</u>
Facility Type: $\underline{SFO}(\underline{65\times65})$ New \Box Ex	pansion 🔲 Repair	
Basement? 🗆 Yes 🕱 No 🛛 Basement Fixtures? 🗆 Yes 🛛 🗙 No 🔍	1755EM (Initial) Wastewater Flow: 48	
Type of Wastewater System** 25% REDUCTION	755EM (Initial) Wastewater Flow: 48	C GPD
IJEE HULE DEIUW. II AUDILADIE I		
PUMETO 25% REDUCTION	(Repair)	
Installation Requirements/Conditions Number of trenches		
Septic Tank Size 1000 gallons Exact length of each trench	$\underline{240}$ feet Trench Spacing: $\underline{9}$ Feet	on Center
Pump Tank Size gallons Trenches shall be installed o	n contour at a Soil Cover: <u>24-26</u> inches	
Maximum Trench Depth of:		
(Trench bottoms shall be lev	· · · · · · · · · · · · · · · · · · ·	

in all directions) Pump Requirements: ______ft. TDH vs. _____ GPM

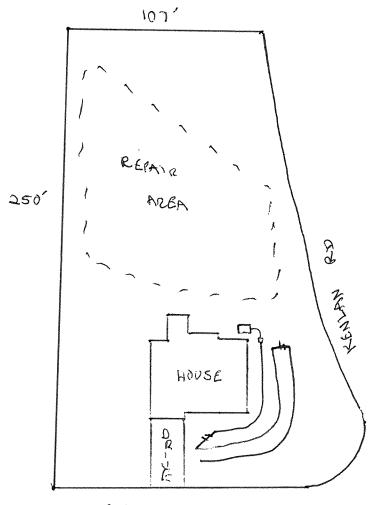
HTE#13-5-30727

_____ 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: 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:	Date:		
This Construction Authorization is subject to revocation if the site plan, plat, or the intended use changes. The Construction Authorization sha	all not be transferred when there is a change in ownership of the site. This		
Construction Authorization is subject to compliance with the previsions of the Laws and Rules for Sewage Treatment and Disposal and to the	conditions of this permit. SEE ATTACHED SITE SKETCH		
Authorized State Agent: D	ate: 4]23)13		
Construction Authorization Expirati	ion Date: 4 23 19		
	f f		





SHEPHARD DR.