HTE# 13-5.30732 Harnett County Department of Public realth	
Improvement Permit	27295
A building permit cannot be issued with only an Improvement Permit	
PROPERTY LOCATION ALLOG CO	
ISSUED TO: SAVY HOMES LLC SUBDIVISION KENZAN FARMS	LOT # <u>" 0</u>
NEW REPAIR EXPANSION Site Improvements required prior to Construction	Authorization Issuance:
Proposed Wastewater System Type: PUME TO 25% REDUCTION (EASENENT)	
Projected Daily Flow:GPD	
Number of bedrooms: <u>4</u> Number of Occupants: <u>8</u> max Basement □Yes X No	
Pump Required: Yes D No D May be required based on final location and elevations of facilities	••••••••••••••••••••••••••••••••••••••
Type of Water Supply: Community Republic Well Distance from well 160. feet Permit valid	for: 🔀 Five years
Permit conditions:	$\square$ No expiration
fift m	
Authorized State Agent:: Det 10 0-6145 Date: 3 12 13	
The issuance of this permit by the thealth Department in no way guarantees the issuance of other permits. The permit holder is responsible for checking with appropriate governing site is subject to revocation in 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 so the Laws and Rules for Sewage Fizithent and Dispose and to ponditions of this permit.	SEE ATTACHED SITE SKETCH bodies in meeting their requirements. This ubject to compliance with the provisions of
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 with the attached system layout.	
ISSUED TO: SAVVY HOMES LLC PROPERTY LOCATION: WIRE RD   SUBDIVISION KENZAN   Facility Type: SFO (65-760) (3:246) X New Expansion	
SED (GETTER LANK) SUBDIVISION KENLAN	LOT # <u>70</u>
Facility Type: Kac Structure Find a Repair	
Basement? Ves X No Basement Fixtures? Yes X No Type of Wastewater System** Pumo To 2.5% REDUCTION (EASEMENT) (Initial) Wastewater	ri. 480 con
(See note below, if applicable [])	Flow: 480 GPD
Installation Requirements/Conditions Number of trenches 1 (Repair)	
Septic Tank Size $1 \otimes 0 \otimes 0$ gallonsExact length of each trench $\underline{a} \lor 0$ feetTrench Spacing: $\underline{-9}$ Pump Tank Size $1 \otimes 0 \otimes 0$ gallonsTrenches shall be installed on contour at aSoil Cover: $\underline{-1} \xrightarrow{-1} \xrightarrow{-1}$	Feet on Center
Maximum Trench Depth of: $18-24$ inches (Maximum soil cover	
(Trench bottoms shall be level to $+/-1/4$ " 36" above the trend	
in all directions)	an bottomy
Pump Requirements:ft. TDH vs GPM	inches below pipe
Conditions: SUDELY LINE ALREADY INSTALLED FROM LOT TO DRAIN FIELD	in the state of th
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 specification	ns of this permit.
Owner/Legal Representative Signature: Date:	
Owner/Legal Representative Signature: Date: _	nge in ownership of the site. This
Construction Authorization is subject to compliance with the previous 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: 3/12/13	
Authorized State Agent And Non Construction Authorization Expiration Date: 3/12/13 Rept 10/21 Construction Authorization Expiration Date: 3/12/18	

