HTE# 13-5-31059 Harnett Co	unty Department of Public	Health
	Improvement Permit	27377
A building pe	rmit cannot be issued with only an Improvement Perm	it
· · · · · ·	PROPERTY LOCATION: 51/437 BA	uland Ris
ISSUED TO: Cumberland Homes Inc	SUBDIVISION BALLANCE WOT	DPSLOT # 150
NEW Z REPAIR C EXPANSION C	Site Improvements required	prior to Construction Authorization Issuance:
Type of Structure:		
Proposed Wastewater System Type:		
Projected Daily Flow: <u>360</u> GPD Number of bedrooms: <u>3</u> Number of Occupants:	(	
Number of bedrooms:3 Number of Occupants:0 Basement □ Yes □ No	emax	
	on final location and elevations of facilities	
Type of Water Supply: Community Public Well	Distance from well feet	Permit valid for: 🛛 Five years
Permit conditions:		□ No expiration
+ollon ressu	ie Monisfold Report	for DISTALL
	1	-
Authorized State Agenting C / Awha	Date: 5-14-13	SEE ATTACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guarantees the issuar site is subject to revocation if the site plan, plat, or the intended use changes. The Im		
the Laws and Rules for Sewage Treatment and Disposal and to conditions of this perm		i the site. This permit is subject to compliance with the provisions of
ſ	onstruction Authorization	
<u> </u>		
TT	(Required for Building Permit)	is sounds and shall be most forstone shall be installed in secondary
The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .19 with the attached system layout.	756, 1757, 1756. and 1757 are incorporated by references into in	is permit and shan be met. Systems shan be instaned in accordance
ISSUED TO: ComhectAnd Homes Two	PROPERTY LOCATION: <u>Soc1437</u>	Balland RD
ISSUED TO: COPARCIANO ACTINES ANC	SUBDIVISION <u>Ballance</u>	
Facility Type: SPAN		
	New 🗆 Expansion 🗆 Repair Yes 🗆 No	
$\sim$		(Initial) Wastewater Flow: <u>360</u> GPD
Type of Wastewater System** <u>Prossure</u> N.	the chald	(initial) Wastewater riow: GPD
(See note below, if applicable 🗆)	MAN fold (Repair) see Repi of trenches <u>1-6</u> see blef	nt -
1 Min Dimention	CAP Stoled (Repair) &	ort
	of trenches <u>1-6</u> sever	9
- Q	ingui di cach d'ench rect i re	inch spacing i cet on center
Pump Tank Size gallons Trenches	shall be installed on contour at a Soi	Cover: inches
	n Trench Depth of: inches (	
	•	36" above the trench bottom)
in all di		<i>y</i>
Pump Requirements:ft. TDH vs GPM		inches below pipe
	Ag Ag	gregate Depth: inches above pipe
Pump Requirements:ft. TDH vs GPM Conditions:FOILON Promine M	constold Report for	wsitell 12 inches total
	V	
WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. F	ROM ANY PART OF SEPTIC SYSTEM OR REPA	IR AREA.
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIE		
<u>**If applicable: I understand the system type specified is differently</u>	nt from the type specified on the application. I ad	ccept the specifications of this permit.
Owner/Legal Representative Signature: This Construction Authorization is subject to revocation if the site plan, plat, or the im		Date:
This Construction Authorization is subject to revocation if the site plan, plat, or the ini Construction Authorization is subject to compliance with the provisions of the Laws and		
сопотисной милионгалион то завлест то соптривное with the provisions of the Laws and	nuitos for semage reactment and pisposar and to the conditions of	UNS PERMIT
Authorized State Agent: 200 2 Ma	Sicher for Date	5-14-13
	Construction Authorization Expiration Date:	5-14 -10
	Butter and a second second second second	

ruction	Authorization	Expiration	Date:	5-	ÌЧ
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