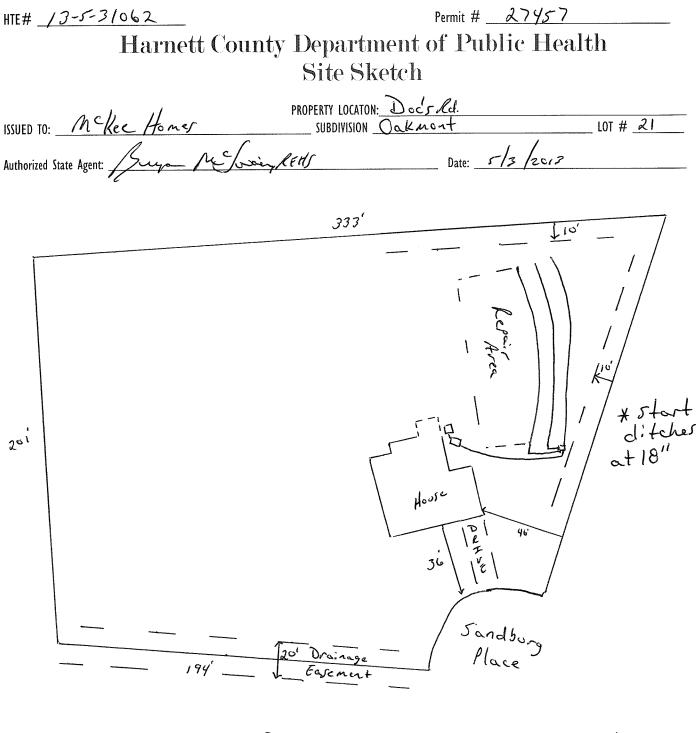
HTE# 13-5-31062 Harn	ett County Depart	ment of Publ	lic Health	
	<u>Improvemer</u>	nt Permit		27457
А	building permit cannot be issued w		Permit	
. 1			•	
ISSUED TO: Mckee Homes	PROPERTY LOG	Oakmint		LOT # <u>21</u>
NEW ビ REPAIR ロ EXPANSIO Type of Structure: <u>SFD らえメ<i>らろ</i></u>	N 🗆	Site Improvements req	uired prior to Construction Autho	prization Issuance:
Proposed Wastewater System Type: <u>Runp to 257</u>	Reduction Such			
Projected Daily Flow: <u>480</u> GPD	orca og na spree			
Number of bedrooms: <u>4</u> Number of Occup	oants: <u>8</u> max			
Basement 🗆 Yes 🗹 No				
Pump Required: 🗹 Yes 🗆 No 🗀 May be requi	ired based on final location and ele	vations of facilities		
Type of Water Supply:  Community  Public Permit conditions:	Well Distance from well	feet	Permit valid for:	Five years
Bast		-1-1		
		5/3/2013		TACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guaran site is subject to revocation if the site plan, plat, or the intended use of the Laws and Rules for Sewage Treatment and Disposal and to condition	hanges. The Improvement Permit shall not b	nit holder is responsible for che e affected by a change in owne	cking with appropriate governing bodies i rship of the site. This permit is subject to	in meeting their requirements. This o compliance with the provisions of
	<b>Construction</b> A	<u>uthorization</u>		
	(Required for Buil			
The construction and installation requirements of Rules .1950, .1952, .19 with the attached system layout.	754, .1955, .1956, .1957, .1958. and .1959	are incorporated by references	into this permit and shall be met. System	is shall be installed in accordance
ISSUED TO: MCKee Homes	PROPERT	TY LOCATION: Doc	s Rd.	
		ION Oaknont		LOT # <u>21</u>
Facility Type: <u>SFD</u> Paramant? Vac KNa Paramant Eint	New 🗆 Expa	nsion 🗆 Repair		
Basement? I Yes I No Basement Fixt Type of Wastewater System**	Lites Lino	icha	(Initial) Wastewater Flow	YOO GPD
(See note below, if applicable $\Box$ )	- TO REQUELTION SP	1/0	(IIIIIai) Wastewater riow.	
25 To Lede	sction Suster	(Repair)		
Installation Requirements/Conditions	Number of trenches 3	( <b>r</b> )		
Septic Tank Size <u>/OOO</u> gallons	Exact length of each trench	/0 0 feet	Trench Spacing:9	Feet on Center
Pump Tank Size gallons	Trenches shall be installed on	contour at a	Soil Cover: <u>6-18</u>	
	Maximum Trench Depth of: 🖉			
	(Trench bottoms shall be level	to +/-1/4"	36" above the trench bot	ttom)
	in all directions)			
Pump Requirements:ft. TDH vs				inches below pipe
	mi ling la mi	* LI	Aggregate Depth:	
Conditions: Joilin area for dr disfurbed. Only remove	treer reeded t	r not to	drain lines	inches total
NATER LINES (INCLUDING IRRIGATION) MUST B NO UTILITIES ALLOWED IN INITIAL OR REPAIR D		SEPTIC SYSTEM OR R	EPAIR AREA.	
**If applicable: / understand the system type specified	' is different from the type speci	fied on the application.	I accept the specifications of	this permit.
Dwner/Legal Representative Signature:			Date:	
Owner/Legal Representative Signature:				
Construction Authorization is subject to compliance with the provisions of	the Laws and Rules for Sewage Treatment a	and Disposal and to the condition	ons of this permit. SEE	ATTACHED SITE SKETCH
Authorized State Agent:	wain, LEHS	Date: _	5-3/2013	
Authorized State Agent: 12013 Construction Authorization Expiration Date: 5/3/2018				



\* If Area for drainfield tor repair is disturbed, other than trees that are needed to be removed for drain line installation, Permit will be Revoked