HTE# <u>1.2-5-3/09</u> 5 Harnett Coun	ty Department of Pub	lic Health	07770
Improvement Permit			27378
		Permit Chalybente Spr	in RD
ISSUED TO Contact Homes Inc	SUBDIVISION <u>Menedate</u>	Sopra	<u>0</u> LOT # 8
NEW \square REPAIR \square EXPANSION \square Type of Structure: $_$ $_$ $_$ $_$ $_$ $_$ \square \square \square	Site Improvements rea	quired prior to Construction Author	ization Issuance:
Proposed Wastewater System Type: 25% REDUCTION			
Projected Daily Flow: <u>360</u> GPD			
Number of bedrooms: Number of Occupants: Basement □Yes ☑ No	max		
Dasement Lifes Z No			Manufantany) (n. 31. 32. 34. 39. 19. 19. 19. 19. 19. 19. 19. 19. 19. 1
Pump Required: 🗆 Yes 📄 No 🗹 May be required based on fir Type of Water Supply: 🗀 Community 🗹 Public 🗀 Well D Permit conditions:	al location and elevations of facilities istance from well feet	Permit valid for:	Five years No expiration
Authorized State Agent Health Department in no way guarantees the issuance of site is subject to revocation if the site plan, plat, or the intended use changes. The Improve the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.		ecking with appropriate governing bodies in	
Con	struction Authorization		
	(Required for Building Permit)		
The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, . with the attached system layout.	1957, .1958. and .1959 are incorporated by references		shall be installed in accordance
ISSUED TO: Comfort Homes Tix	_ PROPERTY LOCATION: 52/9 SUBDIVISION Meaned	41 Chalpanto S	pring RD
Facility Type:	ew 🗆 Expansion 🗆 Repair		
Basement? 🗌 Yes 🗹 No 🛛 Basement Fixtures? 🗌 Yes	No		
Type of Wastewater System** _ 25% 7800000	Syster	(Initial) Wastewater Flow:	<u>360</u> GPD
(Yee weake helens if employed in 1)	$\frac{545}{\text{renches}} \frac{6}{3}$ of each trench $\frac{90}{2}$ feet		
Installation Requirements/Conditions Number of t	renches <u>3</u>	9	
Septic Tank Size 1000 gallons Exact length	of each trench feet	Trench Spacing:	Feet on Center
Pump rank size gallons renches sha	i de installed on contour at a	Soli Cover:	Inches
	ench Depth of: $22 \rightarrow 18$ inches	•	
, i i i i i i i i i i i i i i i i i i i	oms shall be level to $+/-1/4$ "	36" above the trench bot	tom)
in all direction	ons)		
Pump Requirements:ft. TDH vs GPM		Aggregate Depth:	inches below pipe
Conditions:		Aggregate Depth:	inches above pipe
WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM			
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD A		NEFAIN ANEA.	
**If applicable: / understand the system type specified is different fro	om 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 Construction Authorization is subject to compliance with the provisions of the Laws and Rule:			wnership of the site. This ATTACHED SITE SKETCH
Inditionized state Ascine from (hin the Date: Date: Date: Date:	Date: 4 - 25 - 18	

