HTE#<u>13-5-31439</u>

Harnett County Department of Public Health

Improvement Permit

2	7	3	9	6

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: SRISY 2 BID BUCKS CREEKED ISSUED TO: MOSS Honeburdan SUBDIVISION THE CLEAK LOT # NEW 🗹 EXPANSION 🗆 REPAIR 🗆 Site Improvements required prior to Construction Authorization Issuance: SFA Type of Structure: _ Proposed Wastewater System Type: 25% RBBUCREN Projected Daily Flow: 360 GPD Number of Occupants: 6 max Number of bedrooms: 3 1 No Basement **U**Yes May be required based on final location and elevations of facilities Pump Required: 🗆 Yes 🛛 🗆 No Five years Type of Water Supply:
Community
Public
Well Distance from well
feet Permit valid for: Permit conditions: □ No expiration Authorized State Agentic proces & Marchana 6-13-13 Date: SEE ATTACHED SITE SKETCH The issuance of this permit by the bealth Department in no way guarantees the issuance of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This site is subject to revocation if 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 subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.. **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. Systems shall be installed in accordance with the attached system layout. ISSUED TO: MOSS Homebuildens PROPERTY LOCATION: 321542 OID BUCKS CLER RA SUBDIVISION THE CREEK LOT # 10 New New Facility Type: _____ Expansion Repair Basement Fixtures? 🔲 Yes 2 No Basement? Yes (Initial) Wastewater Flow: <u>360</u> GPD Type of Wastewater System** 25% izenucon Jystob (See note below, if applicable \Box) 2590 RSDULOZON Jrsta (Repair) Number of trenches Installation Requirements/Conditions Exact length of each trench <u>80</u> feet Trench Spacing: <u>7</u> Feet on Center Trenches shall be installed on contour at a Soil Cover: <u>6</u> inches Septic Tank Size 1000 gallons Pump Tank Size _____ gallons Trenches shall be installed on contour at a Maximum Trench Depth of: 24 - 18 inches (Maximum soil cover shall not exceed (Trench bottoms shall be level to +/-1/4" 36" above the trench bottom) in all directions) Pump Requirements: ______ft. TDH vs. _____ GPM 6 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: / 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 shall not be transferred when there is a change in ownership of the site. This				
Construction Authorization is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Dispos	al and to the conditions of this permit. SEE ATTACHED SITE SKETCH			
Authorized State Agent: 2 M Markov Zonstruction Authorization	Date: <u>6-13-13</u> n Expiration Date: <u>675-13</u>			

