HTE# 13-5-31449 Harnett County Department of Public Health

Improvement Permit

27394

A building permit cannot be issued with only an Improvement Permit Hughes PROPERTY LOCATION: Hay 401 N

SUBDIVISION MELL BRANCH LOT # 20 NEW 🗹 Site Improvements required prior to Construction Authorization Issuance: Type of Structure: _ Proposed Wastewater System Type: 25% 1250 (Tan) Projected Daily Flow: 360 GPD Number of Occupants: _______ max Number of bedrooms: ____ Basement □Yes ☐ May be required based on final location and elevations of facilities Pump Required: ☐Yes ☐ No \square No expiration Date: 10-14-13 The issuance of this permit by the Health 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: Gary Myches

PROPERTY LOCATION: Hwy 40/N

SUBDIVISION M: I Branch

LOT # ZO

Basement? Yes No Basement Fixtures? Yes No basement! u tes v no basement fixtures! u tes v no

Type of Wastewater System**

[Initial] Wastewater Flow: 360 GPD | Repair | Specific Cover: | Soil Cover: | Cover | Specific Cover | Co (See note below, if applicable \square) Installation Requirements/Conditions Septic Tank Size 1000 gallons Pump Tank Size _____ gallons (Trench bottoms shall be level to +/-1/4" 36" above the trench bottom) in all directions) Pump Requirements: ______ft. TDH vs. _____ GPM Contractor to meet onsern 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 specifications of this permit. Owner/Legal Representative Signature: _ 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 Disposal and to the conditions of this permit. SEE ATTACHED SITE SKETCH Date: 6-14-13 Authorized State Agent:

Construction Authorization Expiration Date: 6-14-

Harnett County Department of Public Health Site Sketch

ISSUED TO: GARY HUGHES	PROPERTY LOCATON: Hwy 401 N	
ISSUED TO: GAMY HUGHES	SUBDIVISION Mill Browch	LOT # <u>20</u>
Authorized State Agent: 2	Marshant Date: 6-14-13	
L Contractore	* True Pretroof	ne A Ropa

* Meet ouscre Pais to two Metion. * True Pretreatment Repair

Y NO ROOM for Aug Additions

To properly on Home

Hold Caves Tight
TO BACK OF Home

150 52' SFD

Tight TO

STEPDOWNS WELL BE NEEDED

> * WATER + Power lives to Be RUN DOWN property lines then 50° to Home.