HTE#13-5-31611

Harnett County Department of Public Health

Improvement Permit

27529

| SINGE DI | A bui | ilding permit cannot be issued with only an Improvement Permit |
|--|--|--|
| REPART EXPANSION Site Improvements required prior to Construction Authorization Insuance: Type of Structure: Service Strum Type S | TOTA | PROPERTY LOCATION: BOULDER De |
| Type of Marts supply Community Public Well Distance from well Occupants Free years Permit conditions: Number of Occupants I | | |
| Proposed Waterware System Type Q S P REJUCTIVE S J S SEATHER SITE STEED THE COORDINATE SHARP SHEET SHEET SHARP REQUIRED THE STEED AND PROPERTY LOCATION. Premit valid for: Permit val | NEW REPAIR EXPANSION Type of Structure: SEO (57.446.) | Site Improvements required prior to Construction Authorization Issuance: |
| The contraction and incultation enginement of flots 1951 1952 1952 1953 1953 1953 1953 1953 1954 1953 1954 1955 1954 1955 1954 1955 | Proposed Wastewater System Type: 2 C/s R 50165 | 10 n S JETEM |
| Number of Occupants: | Projected Daily Flow: CDD CDD | 100 0 95 L |
| Basement Ves No | Number of hadrooms: S Number of Occupant | er. 10 may |
| Pump Requirements: No Basement Fixtures? Yes No Basemater Fixtures? Yes No Basemater Fixtures? Yes No Basemater Fixtures? | | s |
| Permit conditions: Permit conditions: Permit valid for: Five years | | based on final location and elevations of facilities |
| Trenche shall be installed on center of the genuit by the Helsith Department in one by guarantees the Survey of the permit hade it reportment for the literal or and or the literal or and or a conditions of this permit is subject to compliance with the permit in the standard system (Required for Building Permit) (| | Well Distance from well 100 feet Permit valid for: Five years |
| Trenche shall be installed on center of the genuit by the Helsith Department in one by guarantees the Survey of the permit hade it reportment for the literal or and or the literal or and or a conditions of this permit is subject to compliance with the permit in the standard system (Required for Building Permit) (| | |
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| Required for Building Permit | The issuance of this permit by the Health Department in no way guarantees site is subject to revocation if the site plan, plat, or the intended use chang | the issuance of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This ges. 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 |
| Required for Building Permit | | Construction Authorization |
| The construction and introllation requirements of Roles 1950, 1951, 1956, 1951, 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. SISUED TO: | | |
| PROPERTY LOCATION: Subject to expectation is subject to expendition for the first applicable: Junderstand the system type specified in the standard specified in the standard specified in state. This construction Authorization is subject to expendition in subject to expendition is subject to expendition in subject to expendition is subject to expendition in subject to expendition in subject to expendition is subject to expendition in the subject to expe | The construction and installation requirements of Rules .1950, .1952, .1954, | · · · · · · · · · · · · · · · · · · · |
| SubDivision Repair Expansion Repair Expansion Repair Expansion Repair Repair Expansion Repair Re | with the attached system layout. | |
| See note below, if applicable See Se | ISSUED TO: 750 BUILDEDS INC | PROPERTY LOCATION: BOULDER De |
| Basement? Yes No Basement Fixtures? Yes No Cyce note below, if applicable See No Sec Note See No Sec No Sec Note See No Sec Note See No Sec Note See Note See No Sec Note See Not | 1000 | |
| Basement? Yes No Basement Fixtures? Yes No Cyce note below, if applicable See No Sec Note See No Sec No Sec Note See No Sec Note See No Sec Note See Note See No Sec Note See Not | Facility Type: SFO 1 746 | |
| See note below, if applicable | Basement? Yes No Basement Fixture | 25? □ Yes No |
| See note below, if applicable | Type of Wastewater System** _ 25% Res | SUCTION SYSTEM (Initial) Wastewater Flow: 600 GPD |
| Septic Tank Size Septic Tank | (See note below if applicable []) | · · · |
| Number of trenches 1 2 5 5 5 6 | 25% REDU | CTION SYSTEM (Repair) |
| Exact length of each trench 1 90 feet Trench Spacing: Feet on Center Pump Tank Size gallons Exact length of each trench 1 90 feet Trench Spacing: Feet on Center Soil Cover: | | |
| Pump Tank Size | | |
| Maximum Trench Depth of: 22-30 inches (Maximum soil cover shall not exceed (Trench bottoms shall be level to +/-1/4" 36" above the trench bottom) Pump Requirements: | , | |
| (Trench bottoms shall be level to +/-1/4" 36" above the trench bottom) in all directions) Pump Requirements: | | ^ ^ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ |
| in all directions) Pump Requirements:ft. TDH vs GPM | | , , |
| Pump Requirements: | , | · |
| Aggregate Depth: | | , |
| VATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM ANY PART OF SEPTIC SYSTEM OR REPAIR AREA. IO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD AREA. Serif 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: | Pump Requirements:ft. TDH vs | |
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| Owner/Legal Representative Signature: Disconstruction Authorization is Subject to revocation if the Size 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 Authorized State Agent: Date: Dat | Conditions: | inches total |
| Owner/Legal Representative Signature: | 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. | |
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| Authorized State Agent: Construction Authorized State Agent: Date: 17 13 | This Construction Authorization is subject to revocation if the stee 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 |
| Authorized State Agent: PEHS Date: 7 17 33 | | |
| | | |
| Constitution Authorization Expiration Date: | Authorized State Agent: | |
| | | Construction Authorization Expiration Date: |

Harnett County Department of Public Health Site Sketch

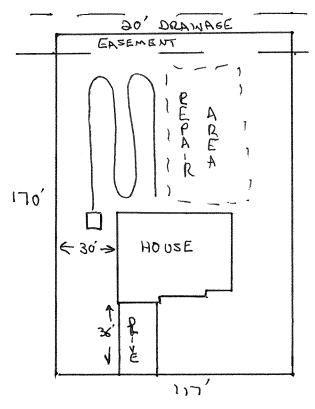
Authorized State Agent:

PROPERTY LOCATON: BOULDERS De
SUBDIVISION LES: LANDING CTHE SUMMIT LOT # 153

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BOULDER DR.