HTE# 13-5-31640 Harnett County Department of Public Health

Improvement Permit

27554

i	A building permit cannot be issued	with only an Improvement	Permit	^
ISSUED TO: TRAVES B Bai	ley SUBDIVISIO	N Regal Cra	Auga Rever Ro	LOT # /
NEW ☑ REPAIR □ EXPANSI	ON 1		uired prior to Construction Author	
Type of Structure: 5FD				M-1
Proposed Wastewater System Type: 25% 128500	760			
Projected Daily Flow: 480 GPD Number of bedrooms: 4 Number of Occu	tr. Ø			
Basement \square Yes \square No	pants: <u>8</u> max			
	uired based on final location and	elevations of facilities		
Type of Water Supply: Community Public Permit conditions:	☐ Well Distance from well	feet	Permit valid for:	☐ Five years ☐ No expiration
· .	4 . /	· · · · · · · · · · · · · · · · · · ·		
Authorized State Agents: The issuance of this permit by the Health Department in no way guar site is subject to revocation if the site plan, plat, or the intended use the Laws and Rules for Sewage Treatment and Disposal and to condition	antees the issuance of other permits. The p changes. The Improvement Permit shall no		cking with appropriate governing bodies in	
	Construction	Authorization		
	(Required for B	uilding Permit)		
The construction and installation requirements of Rules .1950, .1952, . with the attached system layout.	1954, .1955, .1956, .1957, .1958. and .19	159 are incorporated by references	into this permit and shall be met. Systems	shall be installed in accordance
ISSUED TO: TRAVES B BO	way PROPI	ERTY LOCATION: SR191	& REVER RD	
	SUBDI	VISION Regal	Crast	LOT #
Facility Type: SFD	🗹 New 🗆 Ex	pansion 🗆 Repair		
Basement? Yes No Basement Fix	ktures? 🗌 Yes 🔛 No			
Type of Wastewater System** 25% 75%	JUTUON Syster		(Initial) Wastewater Flow:	<u>980</u> GPD
25% 165	Number of translas	(Repair)		
mstanation nequirements/continuents	Manipel of frenches		9	
Septic Tank Size 1200 gallons	Exact length of each trench			Feet on Center
Pump Tank Size gallons	Trenches shall be installed of			inches
	Maximum Trench Depth of:		(Maximum soil cover shall	
	(Trench bottoms shall be lev	vel to +/-1/4"	36" above the trench bott	tom)
D D ' (TDII	in all directions)		/	
Pump Requirements:ft. TDH vs	GPM		A	inches below pipe
Candidiana.			Aggregate Depth:	inches above pipe
Conditions:				inches total
WATER LINES (INCLUDING IRRIGATION) MIST	DE TOET EDOM ANY DADT (AF CERTIC CVCTEM OR I	AFRAIR AREA	
WATER LINES (INCLUDING IRRIGATION) MUST		IL ZELLIC ZAZLEW OK I	CEPAIK AKEA.	
NO UTILITIES ALLOWED IN INITIAL OR REPAIR	UKAIN FIELD AKEA.			
**If applicable: I understand the system type specifie	d is different from the type sp	ecified 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,	•		·	•
Construction Authorization is subject to compliance with the provisions	of the Laws and Rules for Sewage Treatme	nt and Disposal and to the conditi	ons of this permit. SEE	ATTACHED SITE SKETCH
	S.M. 1	le.	~	
Authorized State Agent:	- / ANNAN	Date:	1-16-13	
	Construction Au	thorization Expiration D	ate: <u>1-16-18</u>	

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Harnett County Department of Public Health Site Sketch

