HTE# 13-5-31675

## Harnett County Department of Public Health 24398

Improvement Permit

A dutiding permit co	PROPERTY LOCATION: DIP IMPROVEM	ent Permit	
ISSUED TO: SAVY HOMES LLC	SUBDIVISION MAMIE		LOT # 10 )
		required prior to Construction Author	
NEW X REPAIR CHARACTER SEDUS SECULOS AND CHARACTER SEDUS SECULOS AND CHARACTER SEDUS SECULOS AND CHARACTER SEDUCION CONTROL CO			
Proposed Wastewater System Type: 250/0 REDUCTION			
Projected Daily Flow: 480 GPD			
Number of bedrooms: Number of Occupants:	max	•	
Basement □Yes ★ No		W. /	
Pump Required: ☐Yes ☐ No May be required based on fina	location and elevations of facilities		<b>\</b>
Type of Water Supply:   Community   Public   Well Dist	ance from well $100$ feet	Permit valid for:	Five years
Permit conditions:			☐ No expiration
Authorized State Agent::	REN'S Date: 8 13 13	CEE ATT	ACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guarantees the issu			
their requirements. This site is subject to revocation if the site plan, plat, or the ini			
permit is subject to compliance with the provisions of the Laws and Rules for Sewag			
Const	ruction Authorization		
The construction and installation requirements of Rules .1950, .1952, .1954, .1955,	equired for Building Permit)	arated by references into this normit and	chall he met Sustans chall he
installed in accordance with the attached system layout.	1750, 1757, 1750. and 1757 are sitting	rated by references into this permit and s	shan be met. Systems shan be
ISSUED TO: SAVY HOMES LLC	PROPERTY LOCATION:	10 42)	
	SUBDIVISION MOMINICALINA	10421 E BELL ROCE	LOT # 196
Facility Type: SEO (S5 X47) New	Expansion Repa		201 11 101
Facility Type: SEO (SS X Y 8) New Basement?  Yes No Basement Fixtures?  Yes	No No	···	
Type of Wastewater System** 25% REDUCTION	_(Initial) Wastewater Flow:	480 GPD	
(See note below if applicable [])		UI D	
(see note below, if applicable ) 25% REDUCTION	(Repair)		
Installation Requirements/Conditions	(Nepun)		
massissian ried an emercia constituina			
Septic Tank Size 1000 gallons Exact length o	f each trench 5×60 feet	Trench Spacing:	Feet on Center
·	be installed on contour at a		-
			inches
/	ch Depth of: 18 inche		
,	is shall be level to +/-1/4"	36" above the trench bott	iom)
in all direction	5)		
Pump Requirements:ft. TDH vs GPM			inches below pipe
		Aggregate Depth:	
Conditions:			inches total
**If applicable: / understand the system type specified is di	fferent from the type specified on t	the application. I accept the specifi	ications of this permit.
Owner/Legal Representative Signature:		Date:	
Owner/Legal Representative Signature: This Construction Authorization is subject to revocation if the site plan, plat, or the	ntended use changes. The Construction Aut	horization shall not be transferred when the	here is a change in ownership
of the site. This Construction Authorization is subject to compliance with the provision	ns of the Laws and Rules for Sewage Treatr	ment and Disposal and to the conditions o	of this permit.
	~ 1. 4	SEE ATT	FACHED SITE SKETCH
Authorized State Agent:	Date Date	e: 8 13 13 1	
Con	Date Struction Authorization Expiration	Date: 4 13 17	
	'	' 7	=

## Harnett County Department of Public Health Site Sketch



