HTE# 13-5-31834

Harnett County Department of Public dealth

Improvement Permit

27660

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: MARKS RD unseriano Homes luc SUBDIVISION ASHEFORD NEW 🔀 Site Improvements required prior to Construction Authorization Issuance: Type of Structure: SFO(56'xC To 25% PEDUCTION Proposed Wastewater System Type: Pump Projected Daily Flow: 350 Number of bedrooms: _ 3 Number of Occupants: Basement Yes ☐ No Pump Required: Xes ☐ May be required based on final location and elevations of facilities Type of Water Supply:

Community Public

Well Distance from well 100 feet Five years Permit valid for: Permit conditions: ■ No expiration 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: CUMBERLAND Homes INC PROPERTY LOCATION: SUBDIVISION ASHEFORD LOT # 12 Facility Type: SFO (56 X64) Expansion Basement Fixtures?

Yes PUMPTO 25% REDUCTION SYSTEM (Initial) Wastewater Flow: 360 GPD Type of Wastewater System** (See note below, if applicable) ume to 25% REDUCTION (Repair) Installation Requirements/Conditions Number of trenches ____\ Trench Spacing: Feet on Center Septic Tank Size 1000 Exact length of each trench 120 Pump Tank Size \ OOO gallons Trenches shall be installed on contour at a Soil Cover: 12-20 inches Maximum Trench Depth of: 84-32 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 __ inches below pipe Aggregate Depth: ______ inches above pipe 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: 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 respect t 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: Construction Authorization Expiration Date:

Harnett County Department of Public Health Site Sketch

Authorized State Agent:

PROPERTY LOCATON: MARKS RO

LOT # 12

Authorized State Agent: Details October Tolksbook Date: 8 22/3

