HTE# 13-5-31951

Harnett County Department of Public Health

Improvement Permit

27571

A	building permit cannot be issued w			<i>(</i> 00
ISSUED TO Confort Homes			halyberte Spei	Ng 14)
1330ED 10.		Menedici	-	LOT # 5
NEW REPAIR □ EXPANSION Type of Structure: SF SF SF SF SF SF SF SF SF S		Site Improvements rec	quired prior to Construction Autho	rization Issuance:
Proposed Wastewater System Type: 25% 120100	cair			
Projected Daily Flow: 360 GPD				
Number of bedrooms: 3 Number of Occu	pants: 6 max			
Basement Yes No				
	ired based on final location and ele	vations of facilities		· · · · · · · · · · · · · · · · · · ·
Type of Water Supply: ☐ Community ☐ Public Permit conditions:	☐ Well Distance from well _	feet	Permit valid for:	☐ Five years☐ No expiration
	. 1		, , , , , , , , , , , , , , , , , , , ,	
Authorized State Agent:	Monthant Date:	8-30-	CEE AT	TACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guara site is subject to revocation if the site plan, plat, or the intended use of the Laws and Rules for Sewage Treatment and Disposal and to condition	ntees the issuance of other permits. The pern changes. The Improvement Permit shall not b	nit holder is responsible for che	ecking with appropriate governing bodies in	n meeting their requirements. This
	Construction A	<u>uthorization</u>		
	(Required for Buil	lding Permit)		
The construction and installation requirements of Rules .1950, .1952, .t with the attached system layout.	954, .1955, .1956, .1957, .1958. and .1959	are incorporated by references	into this permit and shall be met. System	s shall be installed in accordance
ISSUED TO: Contont Home	PROPER	TY LOCATION: 32/4	14/ Chalpeat	5, Springs PC
		SION Mercil	the STHOREN	
Facility Type: SFD	🖬 New 🗆 Expa	nsion 🗆 Repair		
Racament? Vas Vo Racament Fiv	tures? Yes No	_		
Type of Wastewater System** 18mp to	25% 1080000	\sim	(Initial) Wastewater Flow:	360 GPD
(Can note heless if annicable 1)			,	
10mp to	75% Padeca Number of trenches 2	<u>-V~</u> (Repair)		
Installation Requirements/Conditions			\mathcal{Q}	
Septic Tank Size / CO S gallons	Exact length of each trench _	/00feet	Trench Spacing:	_ Feet on Center
Pump Tank Size gallons	Trenches shall be installed on	contour at a	Soil Cover:	inches
•	Maximum Trench Depth of: <u>3</u>	inches	(Maximum soil cover shall	not exceed
	(Trench bottoms shall be level		36" above the trench bot	
	in all directions)		Jo above the trench bot	
D. B. '	•		6	
Pump Requirements:ft. TDH vs	GPM		Aggregate Depth: 2	inches below pipe inches above pipe
Conditions:			Aggregate Depth:	inches above pipe
WATER LINES (INCLUDING IRRIGATION) MUST I	BE 10FT. FROM ANY PART OF	SEPTIC SYSTEM OR	REPAIR AREA.	
NO UTILITIES ÀLLOWED IN INITIAL OR REPAIR D				
**If applicable: I understand the system type specified	d is different from the type speci	ified 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,			Date:	
Construction Authorization is subject to compliance with the provisions of	of the Laws and Rules for Sewage Treatment	and Disposal and to the condit	ions of this permit. SEE	ATTACHED SITE SKETCH
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Authorized State Agent:	1 montant	Date:	<u>\$.30~3</u>	

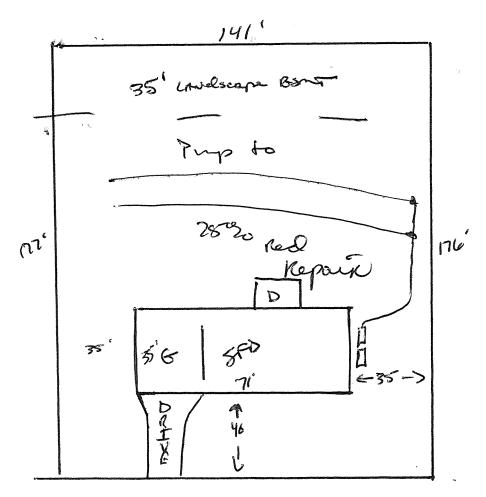
Construction Authorization Expiration Date:

HTE#	13-	5-	31	5	5	1

Permit # _____2757 |

Harnett County Department of Public Health Site Sketch

	PROPERTY LOCATON: 87/44/ Cholybeate So Red
ISSUED TO: Comfort Homes	FROPERTY LOCATON: 57441 Cholybroate Sp RD THE SUBDIVISION Meredit Spories LOT # 5
Authorized State Agent:	Manhort @ 18-30-13
7)	



Mereditte in.