## 

**Improvement Permit** 

27579

A building permit cannot be issued with only an Improvement Permit		
ISSUED TO: Comfort Homes to	SUBDIVISION Mere clith	Hyberte Springs RD STATION LOT # 4
NEW REPAIR EXPANSION  Type of Structure:		prior to Construction Authorization Issuance:
Proposed Wastewater System Type: 25% RADUCT	40	
Projected Daily Flow: 360 GPD		
Number of bedrooms: Number of Occupant	s: <u>6</u> max	
Basement □Yes ☑ No		
Type of Water Supply:   Community   Public	based on final location and elevations of facilities  Well Distance from well feet	Permit valid for: Five years
Permit conditions:		No expiration
Authorized State Agent	Anhart Date: 9-23-13	SEE ATTACHED SITE SKETCH
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 w yes. The Improvement Permit shall not be affected by a change in ownership o	with appropriate governing bodies in meeting their requirements. This
	Construction Authorization	
	(Required for Building Permit)	
with the attached system layout.	.1955, .1956, .1957, .1958. and .1959 are incorporated by references into the	
ISSUED TO: Comfort Homes 3	PROPERTY LOCATION: Sn 1441 SUBDIVISION Mens ditt	Chalpheste Spring 12D
Facility Type:	New Expansion Repair	
Basement?  Yes No Basement Fixture	· · · · · · · · · · · · · · · · · · ·	
Type of Wastewater System** 25% 7670000	on (Pump to 25%)	(Initial) Wastewater Flow: 360 GPD
(See note below, if applicable $\square$ )	02 (10,4) (22.22)	(illitial) Wastewater Flow Of D
True to 2	50 (Repair)	
	Number of trenches	
		nch Spacing: Feet on Center
		Cover: Inches
	- F.II	Maximum soil cover shall not exceed
	· · · · · · · · · · · · · · · · · · ·	36" above the trench bottom)
•	n all directions)	30 above the trench bottom
	GPM	inches below pipe
rump requirementstt. 1Dn vs		gregate Depth: 2 inches above pipe
Conditions	_	inches total
Conditions:	377777777777777777777777777777777777777	Incles total
	TOTAL TROOP AND DEPOT OF SERVICE CONSTRUE OR DEPOT	ID ADEA
•	10FT. FROM ANY PART OF SEPTIC SYSTEM OR REPA	IK AKEA.
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRA	IN FIELD AREA.	
**If applicable: / understand the system type specified is	different from the type specified on the application. I ac	ccept the specifications of this permit.
Owner/Legal Representative Signature:		Date:
, ,	or the intended use changes. The Construction Authorization shall not be tran	· · · · · · · · · · · · · · · · ·
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:	Solution Date:	9-23-13
	Construction Authorization Expiration Date:	9-23-18

## Harnett County Department of Public Health Site Sketch

ISSUED TO: Confort Homes INC SUBDIVISION Neverth 55 LOT # 4

Authorized State Agent: Date: 9-23 13

