Authorized State Agent(

Harnett County Department of Public Health

Improvement Permit

27578

A building permit cannot be issued with only an Improvement Permit 3 on fact Homes PROPERTY LOCATION: SOLVEY BY PROPERTY LOCATION: SOLVEY BY SUBDIVISION STRTSON NEW 🗹 EXPANSION Site Improvements required prior to Construction Authorization Issuance: Type of Structure: Proposed Wastewater System Type: 25% で分してつい Projected Daily Flow: _____ 3 6 O ___ GPD 3___ Number of Occupants: 6 max Number of bedrooms: May be required based on final location and elevations of facilities Pump Required: □Yes ☐ No Type of Water Supply:

Community Public Well Distance from well _______ feet Five years Permit valid for: Permit conditions: ☐ No expiration Authorized State Agent:: Date: The issuance of this permit by the realth 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, .1954, .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. PROPERTY LOCATION: 50 1448 ATVINS NO SUBDIVISION STETSON LOT # 34 Facility Type: _ □ Expansion ☐ Repair Basement Fixtures? Yes No Basement? Yes 25% RADUCTUN Systa (Initial) Wastewater Flow: 360 GPD Type of Wastewater System** (See note below, if applicable □) Installation Requirements/Conditions Number of trenches Exact length of each trench 50 feet Trench Spacing: 7 Feet on Center Trenches shall be installed on contour at a Soil Cover: 6 inches Septic Tank Size //OO gallons Pump Tank Size _____ gallons Maximum Trench Depth of: 22 > 18 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 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 revocation if the site plan, plat, or the intended use changes. The Construction Authorization shall not be transferred when there is a change in ownership of the site. This 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 Date: 9-17-13

Construction Authorization Expiration Date: 5 - 19-18

Harnett County Department of Public Health Site Sketch

		PROPERTY LOCATON:	521448 ATKINS	s RD
ISSUED TO:	Confort Hone	SUBDIVISION	STATSON	LOT # <u>34</u>
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Authorized State	Agent ares 2/	Vandort	Date:	9-19-13
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