HTE# 13-5-32227

Harnett County Department of Public Health

Improvement Permit

27623

| A | building permit cannot be issued with | only an Improvement | Permit | |
|---|--|--------------------------------|--|--|
| | PROPERTY LOCAT | TION: DOCKRO | <u>{</u> | |
| ISSUED TO: Wyon Construct: u | SUBDIVISION | | | LOT # <u>2 J</u> |
| NEW REPAIR C EXPANSION Type of Structure: FD 60x60 | l 🗆 | Site Improvements req | uired prior to Construction Author | rization Issuance: |
| Proposed Wastewater System Type: 25% Leduc | tion Sustem | | | |
| Projected Daily Flow: 480 GPD | | | | |
| Number of bedrooms: 4 Number of Occupa | ants: 8 max | | | |
| Basement \square Yes \square No | intsmax | | | |
| Pump Required: □Yes ☑ No □ May be requir | red based on final location and eleva | tions of facilities | | |
| Type of Water Supply: Community Public Permit conditions: | ☐ Well Distance from well | feet | Permit valid for: | ☐ Five years☐ No expiration |
| | | | | |
| | A- 11C | | | |
| Authorized State Agent:: The issuance of this permit by the Health Department in no way guarant site is subject to revocation if the site plan, plat, or the intended use che Laws and Rules for Sewage Treatment and Disposal and to conditions | tees the issuance of other permits. The permit anges. The Improvement Permit shall not be a | | cking with appropriate governing bodies in | |
| | Construction Aut | thorization | | |
| | (Required for Buildi | | | |
| The construction and installation requirements of Rules .1950, .1952, .19. | | | into this normit and shall he mot Sustame | shall be installed in accordance |
| with the attached system layout. | | | | shan be histaneu ili accordance |
| ISSUED TO: Wynn Construct. Facility Type: SFD | on property | LOCATION: Dog | 's Rd | |
| m - A | SUBDIVISIO | N Trotter | R:dge | LOT # <u>23</u> |
| Facility Type: | 🗹 New 🗌 Expans | ion 🗆 Repair | • | |
| Basement? Yes No Basement Fixto | ures? 🗆 Yes 🗆 No | | | |
| Type of Wastewater System** 257 Led | uction System | | (Initial) Wastewater Flow: | 480 GPD |
| (See note below, if applicable) | | | (| VI D |
| 25% Pales | -iva Systen | _(Repair) | | |
| | | _(nepair) | | |
| Installation Requirements/Conditions | Number of trenches | | 9 | |
| Septic Tank Size / OOO gallons | Exact length of each trench | | Trench Spacing: 9 | |
| Pump Tank Size gallons | Trenches shall be installed on co | _ | Soil Cover: 6-18 | inches |
| | Maximum Trench Depth of: 18 | -30 inches | (Maximum soil cover shall | not exceed |
| | (Trench bottoms shall be level to | +/-1/4" | 36" above the trench bot | tom) |
| | in all directions) | | | ·-···, |
| Pump Requirements:ft. TDH vs | • | | | inakan kulang nina |
| rump requirementstt. 1Dn vs | _ drn | | | inches below pipe |
| Conditions: Step downs may be ne | eded | | Aggregate Depth: | inches above pipe inches total |
| | | | | |
| WATER LINES (INCLUDING IRRIGATION) MUST B NO UTILITIES ALLOWED IN INITIAL OR REPAIR DI | | EPTIC SYSTEM OR R | EPAIR AREA. | |
| | | | | |
| **If applicable: I understand the system type specified | is different from the type specifie | d on the application. | I accept the specifications of | this permit. |
| Owner/Legal Representative Signature: | | | Date: | |
| Owner/Legal Representative Signature: | at, or the intended use changes. The Construc | tion Authorization shall not b | e transferred when there is a change in o | wnership of the site. This |
| Construction Authorization is subject to compliance with the provisions of | | | | ATTACHED SITE SKETCH |
| // 1.0/ | | | // | |
| Authorized State Agent: Luga MC | sing KEHS | Date: _ | 10/23/2013 ate: 10/27/2018 | *************************************** |
| •/ . | Construction Authori | zation Expiration D | ate: <u>/0/2/2018</u> | |

Harnett County Department of Public Health Site Sketch

| | PROPERTY LOCATON: Doc's RJ | |
|--|----------------------------|----------------|
| ISSUED TO: Wyn Construction | SUBDIVISION Trotters Ridge | LOT # <u> </u> |
| | | |
| Authorized State Agent: Suga McCoon, A | LEHS Date: 10/23/2 | 017 |

