HTE# <u>13-5-3239</u> 0 Harn	ett County Depai		lic Health	27600
	Improvem	<u>ent Permit</u>		27000
Α	building permit cannot be issued	l with only an Improvement	Permit	
hode Tracin	PROPERTY I	LOCATION: <u>SR 1401</u>	COLLENS MEN,	<u>RS</u>
ISSUED TO: Wesley JARRie	SUBDIVISIO	N		LOT # <u>2</u>
NEW DY REPAR D EXPANSION Type of Structure: SFD	N L	Site Improvements rec	uired prior to Construction Author	rization Issuance:
Type of Structure:	MITAI	·····		
Projected Daily Flow: GPD	VCI DN			
Number of bedrooms: Number of Occup	ants: max			
Basement Yes No	_0			
Pump Required: 🛛 Yes 🗆 No 🖾 May be requi	red based on final location and	elevations of facilities		and a second
Type of Water Supply: 🗆 Community 🛛 Public	□ Well Distance from well	feet	Permit valid for:	Five years
Permit conditions:				$\Box$ No expiration
	<i>.</i>		· · · · · · · · · · · · · · · · · · ·	
Authorized State Agent:	al ten	e: 1/-2/-1	3 (15 41	
The issuance of this permit by the health Department in no way guaran				ACHED SITE SKETCH
site is subject to revocation if the site plan, plat, or the intended use ch	nanges. The Improvement Permit shall no	t be affected by a change in owne	ership 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	s of this permit			
			,	
	<u>Construction</u>	<u>Authorization</u>		
	<u>(Required for B</u>	uilding Permit)		
The construction and installation requirements of Rules .1950, .1952, .19 with the attached system layout.		59 are incorporated by references	into this permit and shall be met. Systems	s shall be installed in accordance
ISSUED TO: Wesky JARNiel	PROPI	ERTY LOCATION: <u>MUY</u>	St Zellens Mill R	LOT # 2
>	NewEx			LOI # 🥧
Facility Type: Basement?	ures? 🗆 Yes 🖃 No	pansion 🗀 kepan		
		La	(Initial) Wastewater Flow:	480 GPD
(See note below, if applicable $\Box$ )	u cur sys	- 1 / processor	(IIIIIIai) Wastewater riuw.	
_25% [26	DUCTION	(Repair)		
Installation Requirements/Conditions	Number of trenches	(nepair) 1	0	
Septic Tank Size <u>1200</u> gallons	Exact length of each trench		Trench Spacing:	Feet on Center
Pump Tank Size gallons	Trenches shall be installed o		Soil Cover:	
	Maximum Trench Depth of:		(Maximum soil cover shall	
	(Trench bottoms shall be lev		36" above the trench bot	
	in all directions)			lonij
Pump Requirements:ft. TDH vs	,		la	inches below pipe
rump nequirements:it. 101 vs	_ 0111		Aggregate Depth:2	inches above pipe
Conditions:			Aggregate Deptil.	inches above pipe
			·	inches total
WATER LINES (INCLUDING IRRIGATION) MUST B		IF SEPTIC SYSTEM OK H	(EPAIK AKEA.	
NO UTILITIES ALLOWED IN INITIAL OR REPAIR D	KAIN FIELD AKEA.			
**If applicable: / understand the system type specified	is different from the type spo	ecified on the application.	I accept the specifications of	this permit.
Owner/Legal Representative Signature:			Date:	
Owner/Legal Representative Signature: This Construction Authorization is subject to revocation if the site plan, p	lat, or the intended use changes. The Co	nstruction Authorization shall not I	be transferred when there is a change in o	ownership of the site. This
Construction Authorization is subject to compliance with the provisions of	the Laws and Rules for Sewage Treatmen	nt and Disposal and to the conditi	ons of this permit. SEE	ATTACHED SITE SKETCH
e e e e e e e e e e e e e e e e e e e	al e l		ana ana an <mark>ta ina a sa ana ang ang ang ang ang ang ang ang an</mark>	
Authorized State Agent:	Markont	Date:	11-21-13	
	Construction Aut	thorization Expiration D	11-21-13 ate: 11-21-18	

HTE# <u>13-5-32390</u>	F	Permit #	27600			
Harnett County Department of Public Health						
	Site Sketch					
PROPERTY LOCATON: SA 1401 12011 FOR Mell RD						
ISSUED TO: Wester TAnniel	SUBDIVISION		LOT # <u>Z</u>			
ISSUED TO: Westey Taniel Authorized State Agents Jones & Ma	mlm fe	Date:	11-21-13			

