HTE# 13-5-32493 RR Harnett County Department of Public Health

28051

Improvement Permit

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: SA 1450 BALL RD ISSUED TO: Michael + Elosabeth Smith SUBDIVISION Continental Est NEW 1 REPAIR Site Improvements required prior to Construction Authorization Issuance: JAD Type of Structure: Proposed Wastewater System Type: 25% RRBU CTCO Projected Daily Flow: 720 GPD Number of Occupants: 12 max Number of bedrooms: Basement 1 Yes ☐ No May be required based on final location and elevations of facilities Pump Required: □Yes □ No Five years Type of Water Supply:
Community Public Well Distance from well 100 Type of Water Supply: Permit valid for: Permit conditions: ☐ No expiration mostine Date: ____ 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 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, .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. ISSUED TO: Michael + Flerabell Smith PROPERTY LOCATION: 52 1450 BALL RD SUBDIVISION CONTINENTAL EST LOT # 5 Facility Type: SFD | New | Expansion | Repair | Basement? | Yes | No | Basement Fixtures? | Yes | No 25% REDUCTION System (Initial) Wastewater Flow: 720 GPD Type of Wastewater System** (See note below, if applicable □) 25% 77570 (TW) Sys 7-12 (Repair) Installation Requirements/Conditions Number of trenches _______ feet Trenches Spacing: ______ Feet on Center Trenches shall be installed on contour at a Soil Cover: ______ inches Septic Tank Size 1500 gallons Pump Tank Size gallons Maximum Trench Depth of: 24-218 inches (Maximum soil cover shall not exceed (Trench bottoms shall be level to +/-1/4" 36" above the trench bottom) in all directions) Conditions: ______ Contract on to Meet 5255TR Prive to this total 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: / 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 Authorized State Agent:

Construction Authorization Expiration Date:

HTE# 13-5-32493 RR Harnett County Department of Public Health Site Sketch

ISSUED TO: Michael + Bizabeth Smith Subdivision Continental Bot LOT # 5			
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Authorized State Agent: 2 Man	A	Date:	
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