HTE#<u>13-5-325</u>82

Harnett County Department of Public Health

27714

Improvement Permit

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION SULJOI ROllers MILL RD ISSUED TO: William + Amonda Rotten meyer SUBDIVISION Mother Prince NEW 🗹 Site Improvements required prior to Construction Authorization Issuance: Type of Structure: ______ SFD Proposed Wastewater System Type: 25% 12900 Cres Projected Daily Flow: 480 GPD Number of Occupants: ______ max Number of bedrooms: ____ Basement □Yes 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 Permit valid for: Permit conditions: ■ No expiration Nachant Date: 12-30 - 13 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, .1952, .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. Facility Type: ______ SUBDIVISION _ Repair | ROPERTY LOCATION: 5x1401 | Rolling 5 Nill KD |

New _ Expansion _ Repair Basement Fixtures?

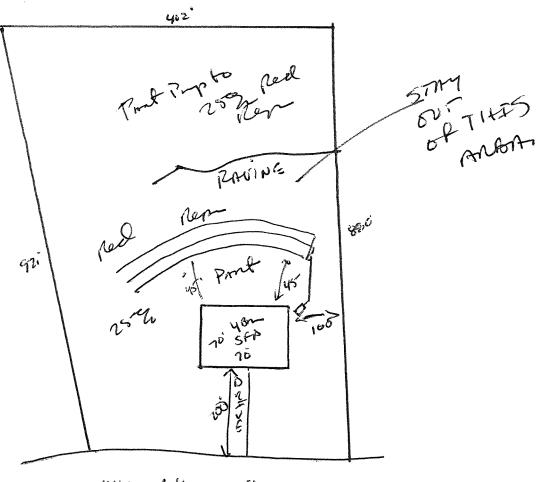
Yes No Basement? Yes 25% REDUCTION Sys 43 (Initial) Wastewater Flow: 480 GPD Type of Wastewater System** (See note below, if applicable \square) ___ Pump to 25% Reduction (Repair) Installation Requirements/Conditions Exact length of each trench 120 feet Trench Spacing: Feet on Center Trenches shall be installed on contour at a Soil Cover: 6 inches Septic Tank Size 1200 gallons Pump Tank Size _____ gallons Maximum Trench Depth of: 24 inches (Maximum soil cover shall not exceed (Trench bottoms shall be level to +/-1/4" 36" above the trench bottom) in all directions) Aggregate Depth: ______ inches below pipe inches above pipe inches total 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. SEE ATTACHED SITE SKETCH 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. < Markon 7 Date: 12-30-13 Authorized State Agent:

Construction Authorization Expiration Date: 17-30-18

HTE#13-5-32502

2502 Permit # <u>277/4</u> Harnett County Department of Public Health Site Sketch

ISSUED TO: Walton + Amondos Retter	PROPERTY LOCATON: 5701901	RollEs Mill	RD
ISSUED TO: WILLIAM + Amonda Retter	rayeSUBDIVISION MATTLE	strine	LOT # <u>3</u>
Authorized State Agent. June 2 Mg	<i>I</i> /	Date:	<u>~13</u>



51.1401 Hollens mile as