HTE# 14-5-32732

Harnett County Department of Public Health

27810

lm	provement l	Permit

	-							
A building	permit	cannot	be issued	with only	y an Ir	mprovement	Permit	
0			ODEDTV I	OCATION	· .	S. 11 1	6 0 C	D

		ION: Will L.		······································
ISSUED TO: Atlantic Construction	SUBDIVISION	Sweetwate		LOT #65
NEW 🖉 REPAIR 🗆 , EXPANSION 🗖		Site Improvements req	uired prior to Construction	Authorization Issuance:
Type of Structure: <u>SFD 39 X43</u>				
Proposed Wastewater System Type: 25% Raturtion System				
Projected Daily Flow: <u>366</u> GPD		· · · · · · · · · · · · · · · · · · ·		
Number of bedrooms: Number of Occupants:	max			
Basement IYes I No				N
Pump Required: 🗆 Yes 🖾 No 🗆 May be required based on fina			-	
Type of Water Supply: Community Public Well Dis Permit conditions:	tance from well	feet	Permit valid	for: Five years . D No expiration
		11.		
Authorized State Agent :: frye Marin REH	Date:	2/7/2014		EE ATTACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guarantees the issuance of or site is subject to revocation if the site plan, plat, or the intended use changes. The Improvem the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.				
Cons	truction Aut	horization		
[] The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .19 with the attached system layout.	Required for Buildi 257, .1958. and .1959 are	• /	into this permit and shall be met.	Systems shall be installed in accordance
ISSUED TO: <u>Atlantic Construction</u>	PROPERTY	LOCATION: W.L	1 Lucar Rd	
	SUBDIVISIO	N Sweetwa	ter	LOT # 65
Facility Type: IV Nev	v 🗆 Expansi	on 🗆 Repair		
Basement? Ves No Basement Fixtures? Yes	□ No			
Type of Wastewater System ** _ 257- Leduction Sys-			(Initial) Wastewater	Flow: 360 GPD
(See note below, if applicable \Box)	<u></u>		(milial) wastewater	, iow. <u>> -> -</u> 010
25% Reduction Sys-	he a	(Papair)		
6		_(nepair)		
Installation Requirements/Conditions Number of tree		700 (T . C . Q	F . C .
	of each trench		Trench Spacing: <u>9</u>	
	be installed on co		Soil Cover: <u>60</u>	
		7,2 inches	(Maximum soil cover	
•	ns shall be level to) +/-1/4"	36" above the trenc	h bottom)
in all direction	15)			
Pump Requirements:ft. TDH vs GPM				inches below pipe
		i	Aggregate Depth:	inches above pipe
Conditions: Sept: c contractor to call pri	ior to inst	alling syste	m	inches total
· · ·				
WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD AR		PTIC SYSTEM OR R	EPAIR AREA.	
<u>**If applicable:</u> / understand the system type specified is different from	n the type specified	d on the application.	I accept the specification	is of this permit.
Owner/Legal Representative Signature:			Date:	
This Construction Authorization is subject to revocation if the site plan, plat, or the intended u Construction Authorization is subject to compliance with the provisions of the Laws and Rules f				nge in ownership of the site. This SEE ATTACHED SITE SKETCH
	· · · · · · · · · · · · · · · · · · ·		2/7/2014	
Autorized state Agent. 1. 9 00-11		Vale	N11 19	<u></u>

Construction Authorization Expiration Date: 2/7/2019

HTE#	14-5-32732	Permit # <u>278/0</u>	
	Harnett County	Department of Public Health	
		Site Sketch	

	PROPERTY LOCATON: W:11 Luca	r Rd	
ISSUED TO: Atlantic Construction	SUBDIVISION Juscetwater	LOT # _ ら ァ	
		1/	
Authorized State Agent: Kith	Date:	2/7/2014	

