## HTE# 14-5-32952 Harnett County Department of Public Health

27734

**Improvement Permit** 

A building permit cannot be issued with only an Improvement Permit				
ISSUED TO: Confort Hones		ATION: 50U941 C	to the best of	101 # 18
NEW REPAIR EXPANSION	N D	Site Improvements requ	uired prior to Construction Authori	ration Issuance:
Type of Structure: 5 PD	( 🗀	Jite improvements roge	uned prior to constituent nation.	Lation issuance.
Proposed Wastewater System Type: 25% 12800	roun _			
Projected Daily Flow: 360 GPD				
Number of bedrooms: 3 Number of Occup	ants: <u>6</u> max			
Basement Yes No				
Pump Required: □Yes □ No □ May be required:	red based on final location and elev	ations of facilities		
Type of Water Supply:  Community Public Permit conditions:			Permit valid for:	☐ Five years ☐ No expiration
	1 -			,
Authorized State Agent:	Manha & Date	3-5-1	₩ SEF ATTA	ACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guaran site is subject to revocation if the site plan, plat, or the intended use of the Laws and Rules for Sewage Treatment and Disposal and to condition:	tees the issuance of other permits. The permi nanges. The Improvement Permit shall not be	it holder is responsible for chec	king with appropriate governing bodies in	meeting their requirements. This
	Construction Au	_ ithorization		
	(Required for Build			
The construction and installation requirements of Rules .1950, .1952, .19	41		into this permit and shall be met. Systems	chall he installed in accordance
with the attached system layout.	JT, 11/24, 11/24, 11/27, 11/24, with	the morphisms of terminates	into the perime and shall be men ejection	Sildi be motaned in accordance
ISSUED TO: Confort Home In PROPERTY LOCATION: on 1441 Chalipents Son is NO SUBDIVISION Mendeth STATION LOT # 19				
			us ointion	LUI #
Facility Type:	New _ Expan	nsion 🗆 Repair		
	ures? Yes No		4 · · · · · · · · · · · · · · · · · · ·	2/ 5 000
,	ou cours dysto	pine.	(Initial) Wastewater Flow: _	<i></i>
(See note below, if applicable □)	- 1			
	BUCTUS Systa			
Installation Requirements/Conditions	Number of trenches $\frac{1}{2}$	·	S	
Septic Tank Size 1000 gallons	Exact length of each trench			Feet on Center
Pump Tank Size gallons	Trenches shall be installed on		Soil Cover: i	nches
	Maximum Trench Depth of:	<u> Z G ラ / S</u> inches	(Maximum soil cover shall n	ot exceed
	(Trench bottoms shall be level		36" above the trench bott	om)
	in all directions)			,
Pump Requirements:ft. TDH vs	_ GPM			inches below pipe
	<b>-</b>		Aggregate Depth:	inches above pipe
Conditions:				'2 inches total
WATER LINES (INCLUDING IRRIGATION) MUST B		SEPTIC SYSTEM OR R	REPAIR AREA.	
NO UTILITIES ALLOWED IN INITIAL OR REPAIR D	RAIN FIELD AREA.			
**If Palls I understand the system type specified	:- Lillarant from the time enecis	Gad on the application	I account the energifications of t	Lia navmit
**If applicable: I 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:		I B . I	Date:	
Owner/Legal Representative Signature:				
Construction Authorization is subject to compliance with the provisions of	the Laws and Rules for Sewage Treatment a	nd Disposal and to the condition	ons of this permit. SEC	ATTACHED SITE SKETCH
Authorized State Agent:	Markont	Date: _	3-5-14 ate: <u>3-5-15</u>	-
	Construction Autho	rization Expiration D	ate: <u>3 -5 -15</u>	

## Harnett County Department of Public Health Site Sketch

ISSUED TO: Compart Homes Tree SUBDIVISION Merceletted STATUS LOT # 0/9

Authorized State Agent: 3-5-14

