HTE#14-5-3309)

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## Harnett County Department of Public Health

27918

Improvement Permit

A building	permit	cannot	be	issued	with	only	an	Improvement	Permit	
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	PROPERTY LOLATION: COPPER GOP	
ISSUED TO: CATES BUILDING INC	SUBDIVISION WEST LANDINCE THE	SUMMIT LOT #16)
NEW 🔀 REPAIR 🗖 — EXPANSION 🗖	Site Improvements required prior to Const	
Type of Structure: SFO (48'×56')	1 1 1	
NEW REPAIR C EXPANSION Type of Structure: SFO (48'756') Proposed Wastewater System Type: 25% REDUCTION System	576M	
Projected Daily Flow: 600 GPD		
Number of bedrooms: <u>5</u> Number of Occupants: <u>10</u>	max	
Basement 🗆 Yes 🔀 No		
Basement □Yes ➤ No Pump Required: □Yes ➤ No □ May be required based on final	l location and elevations of facilities	
Type of Water Supply: Community 🔀 Public 🗆 Well Dist		t valid for: 🔀 Five years
Permit conditions:		No expiration
	1 1	
Authorized State Agent::	Date: 3 224 114	SEE ATTACHED SITE SKETCH

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.

ISSUED TO: CATES BUILDI	PROPERTY LOCATION: Cor	PER LOOP DINC @ THE SUMM IT LOT # 16)
and the form of	SUBDIVISION WEST LAW	DING @ THE SUMMIT LOT # 16)
Facility Type: SPD (48 ×50)	🖌 New 🗆 Expansion 🗆 Repair	_
Basement? 🗆 Yes 🔀 No Basem	Ent Fixtures? I Yes X No REDUCTION SYSTEM	
Type of Wastewater System**0	REDUCTION SYSTEM	(Initial) Wastewater Flow: <u>600</u> GPD
(See note below, if applicable 1.1)	· REDUCTION SUSSEM (Repair)	
Installation Requirements/Conditions	Number of trenches	_
Septic Tank Size 1250 gallons	Exact length of each trench <u>50</u> feet	Trench Spacing: Feet on Center
Pump Tank Size gallons	Trenches shall be installed on contour at a	Soil Cover: 12-74 inches
	Maximum Trench Depth of: <u>24-30</u> inches	(Maximum soil cover shall not exceed
	(Trench bottoms shall be level to $+/-1/4$ "	36" above the trench bottom)
	in all directions)	,
Pump Requirements:ft. TDH vs.	GPM	inches below pipe
		Aggregate Depth: inches above pipe
Conditions:		inches 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.

<u>**If applicable:</u> 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:	Date:			
This Construction Authorization is subject to revocation if the Steplan, 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 Bompliance while the provisions of the Laws and Rules for Sewage Treatment and Dispos				
Authorized State Agent: Construction Authorization Expiration Date: 3 221 24				



