HTE# 14-5-33137R

## Harnett County Department of Public Health

27992

**Improvement Permit** 

A building permit cannot be issued with only an Improvement Permit Stancil Builder PROPERTY LOCATION: 7 ingen as SUBDIVISION Pattern Point PROPERTY LOCATION: Tingen Rd. Site Improvements required prior to Construction Authorization Issuance: Type of Structure: SFO 54 x 43 Proposed Wastewater System Type: 25% Reduction System Number of Occupants: 6 max Number of bedrooms: \_\_\_\_ Basement □Yes □ No Pump Required: □Yes ☐ May be required based on final location and elevations of facilities Type of Water Supply: 

Community Public 

Well Distance from well feet Five years Permit valid for: Permit conditions: ☐ No expiration 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. Basement? Yes Type of Wastewater System\*\* 25% Reduction System (Initial) Wastewater Flow: 360 GPD (See note below, if applicable  $\square$ ) Installation Requirements/Conditions Septic Tank Size /000 gallons Pump Tank Size gallons Maximum Trench Depth of: 18-24 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 Maintain retback from earements \_\_\_\_\_ 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. \*\*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: 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. Authorized State Agent: Construction Authorization Expiration Date:  $\mathcal{D}/2^2/2^{c/9}$ 

## Harnett County Department of Public Health Site Sketch

P	PROPERTY LOCATON: Tinge Rd.		
ISSUED TO: Stancil Builders	SUBDIVISION Patter Point	LOT #	131
	) /		
Authorized State Agent: Sup Mesin REHS	Date: 8/22/2014		

