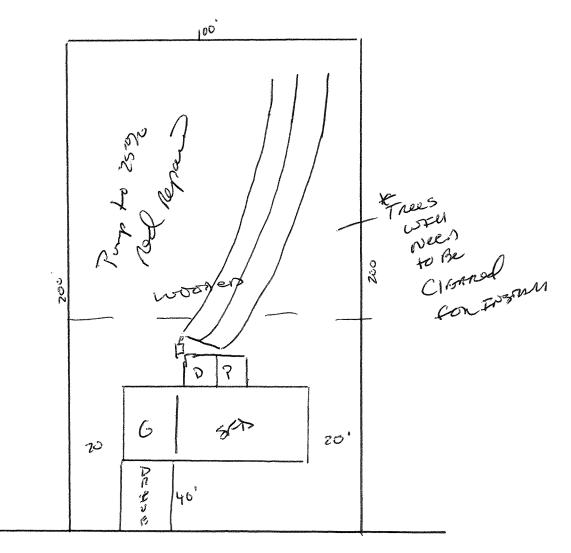
HTE# <u>14 - 5 - 3318</u> 4 Har		Department of P	ublic Health	27750
Improvement Permit				
A building permit cannot be issued with only an Improvement Permit				
ISSUED TO: Bradley Built	~	PROPERTY LOCATION: St. 14	57 Balland	<u>M</u>
ISSUED TO: Dradley Built	ENC	_ SUBDIVISION _ frades	Ponte	LOT #
	ION 🗆	Site Improvement	s required prior to Construction Au	thorization Issuance:
Type of Structure:	NU-MA)		·····	
Projected Daily Flow: GPD				
	upants: <u>6</u>	max		
Basement 🗆 Yes 🖉 No 🦯				
Pump Required: 🗆 Yes 🗆 No 🖾 May be req	uired based on final I	ocation and elevations of facilities		
Type of Water Supply: Community Public Promit conditions	🛄 Well Distar	nce from well feet	Permit valid for:	,
Permit conditions:			······································	No expiration
	<u>a</u> A i	А.		
Authorized State Agent:	Manhon	Date: <u> </u>	SEE SEE	ATTACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guar				
site is subject to revocation if the site plan, plat, or the intended use the Laws and Rules for Sewage Treatment and Disposal and to conditi		Permit shall not be affected by a change in	ownership of the site. This permit is subject	t to compliance with the provisions of
	· · · ·			
	Constr	uction Authorization		
The construction and installation requirements of Rules .1950, .1952, .		quired for Building Permit) . 1958. and .1959 are incorporated by refer	ences into this permit and shall be met. Sys	tems shall be installed in accordance
with the attached system layout.	····, ···, ···,	,		
KSUED TO Snowley Built	TUC	DDODEDTV LOCATION.	1437 Balland	10
ISSUED TO: Dradley Built.		SURDIVISION Madel	1437 Ballmel - Pornte	10T # S
Facility Type:JED	New		<u>- <i>e</i></u>	
Basement? Yes No Basement Fi	xtures? 🗌 Yes		/un	
Type of Wastewater System** <u>25% 767</u>	WUTUD) Fr	ustre-	(Initial) Wastewater Flo	w: 360 GPD
(See note below, if applicable [1])	•			
25% DEL	WUTCON S	<u>strs (</u> Repair)		
Installation Requirements/Conditions	Number of trenc	hes <u>3</u>	Q.	
Septic Tank Size _ <i>[000</i> gallons	Exact length of	each trench <u>&</u>	et Trench Spacing:	Feet on Center
Pump Tank Size gallons	Trenches shall be	e installed on contour at a	Soil Cover:	inches
		Depth of: <u>24</u> inc	`	
	•	shall be level to +/-1/4"	36" above the trench	bottom)
	in all directions)		6	
Pump Requirements:ft. TDH vs	GPM		<u> </u>	inches below pipe
6 . P.			Aggregate Depth:	z inches above pipe
Conditions:				<u>/2</u> inches total
WATER LINES (INCLUDING IRRIGATION) MUST			JK REPAIK AKEA.	
NO UTILITIES ALLOWED IN INITIAL OR REPAIR	DRAIN FIELD ARE	Α.		
**If applicable: / 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 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. SEE ATTACHED SITE SKETCH				
SM 1 AM				
Authorized State Agent: Date: <u>Y-Y-14</u>				
Authorized State Agent: Date: Date: Date: Date: Date:				

Γ

Permit # 27750 HTE# <u>14-5-33184</u> Harnett County Department of Public Health Site Sketch ISSUED TO: Built Inc SUBDIVISION Andre Porte LOT # 9 -> 5 Montont Date: 4-4-14 Authorized State Agent:



Oxfondshine DATUB