HTE#<u>14-5~33208</u>

Harnett County Department of Public Health

27748

Improvement Permit

A building permit canr		ith only an Improvement Permit			
PDC II	PROPERTY LO	ATION: BRZZIS HAR	NET Centr	alros	
ISSUED TO: BRC Homes		QUARIGIBN	-	LOT # 14	
NEW 🖉 REPAIR 🗆 🛛 EXPANSION 🗆		Site Improvements required prior	to Construction Authori		
Type of Structure:SF7					
Proposed Wastewater System Type: 2576728180-28720					
Projected Daily Flow: 480 GPD	-				
	max				
Basement 🛛 Yes 🖾 No	-				
Pump Required: 🗆 Yes 🛛 No 🖾 May be required based on final lo	ocation and ele	vations of facilities		,	
		feet	Permit valid for:	Five years	
Permit conditions:				\Box No expiration	
A					
Authorized State Agent: 2 Monton 2	Date:	3-27-14	SEE ATTA	CHED SITE SKETCH	
The issuance of this permit by the Health Department in no way guarantees the issuance of other	r permits. The pern	it holder is responsible for checking with app	ropriate 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 b	e affected by a change in ownership of the si	te. This permit is subject to c	ompliance with the provisions of	
the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.					
-					
<u>Construction</u> Authorization					
<u>(Req</u>	uired for Buil	ding 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: BIRC Home		PROPERTY LOCATION: <u>3/2</u>	215 HARNET	Catral RD
	/	SUBDIVISION QUASE		LOT # _ <i>]Y</i>
Facility Type:	New	🗆 Expansion 🛛 Repai	r	•
Basement? 🗌 Yes 🗌 No Bas	ement Fixtures? 🔲 Yes	🗆 No 🤰		
Type of Wastewater System** _2.5%	126 Duron	System	(Initial) Wastewater FI	ow: <u>480</u> GPD
(See note below, if applicable \Box)			· ·	
25%	Number of trend	Sys Hos (Repair)		
	Number of trenc	hes	0	
Septic Tank Size <u>1200</u> gallons	Exact length of	each trench <u>60</u> feet	Trench Spacing:	Feet on Center
Pump Tank Size gallons	Trenches shall be	e installed on contour at a	Soil Cover:	inches
	Maximum Trench	Depth of: <u>24</u> inches	(Maximum soil cover sl	nall 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:	N		-	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: / 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.
Authorized State Agent: Markort Date: Date: Construction Authorization Expiration Date:

