HTE#14-5-33307

Harnett County Department of Public Health

27861

Improvement Permit

	A building permit cannot be issued wi	ith only an Improvement	Permit	
ISSUED TO: Robert Crapture B	PROPERTY LOC	VICTOREA	Hafrage He MS	LOT # 22
NEW REPAIR EXPANSI		•	quired prior to Construction Author	
Type of Structure:				
Proposed Wastewater System Type: ZSYCTUSIVUZ Projected Daily Flow: 360 GPD	A Call James			
Number of bedrooms: 3 Number of Occu	ipants: 6 max			
Basement Yes No	purio.			
	uired based on final location and elev	vations of facilities		
Type of Water Supply: Community Public Permit conditions:	☐ Well Distance from well _	feet	Permit valid for:	✓ Five years☐ No expiration
Authorized State Ment:	Date:	4-24-1	e f	TACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guar	antees the issuance of other permits. The perm	nit holder is responsible for ch	ecking with appropriate governing bodies in	n meeting their requirements. This
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-	changes. The Improvement Permit shall not be	e affected by a change in own	ership of the site. This permit is subject to	compliance with the provisions of
the Laws and rules for sewage freatment and disposal and to condition	ons of this permit			
	Construction A	ithorization		
	Construction A			
The construction and installation requirements of Rules .1950, .1952, .	(Required for Buil		ine this name and shall be most System	tall be installed in accordance
with the attached system layout.	1954, .1955, .1950, .1951, .1950. and .1757	are incorporated by references	іпто тіні регіпіт ана знан не інет. Зумені	s shall be installed in accordance
ECCUENTO TO Take + Continue	R. I.D TEX DOODED	TV LOCATION. TO 1	1112 / 1 Can He	670
ISSUED TO: Robert Crustofree	CHIRDINIC	IN LUCATION: 10 A	14.5 CA - 10	, 100 H 27 i
Enaillier Tunas	SUBDIVIS New Expai	nsion \square Repair	ie no	LUI # _ <u>~~ /</u>
Facility Type:		nsion 🗌 Repair		
	NOTES DIES DINO	. \	(Initial) Wastewater Flow:	360 GPD
(See note below, if applicable \square)		· · · · · · · · · · · · · · · · · · ·	(IIIILIAI) Wasichalei Fion.	UI V
(see note below, ii applicable	252 (VE NULS	(Renair)		
Installation Requirements/Conditions	Number of trenches 3	Legine pair j		
Septic Tank Size 1600 gallons	Exact length of each trench _		Trench Spacing:	Feet on Center
Pump Tank Size 1000 gallons	Trenches shall be installed on			inches
Tunip Tank Size Sunons	Maximum Trench Depth of:	4	(Maximum soil cover shall	
	(Trench bottoms shall be level		36" above the trench bot	
	in all directions)		24 W216 Mis 110114	.com/
Pump Requirements:ft. TDH vs	•		6	inches below pipe
	•		Aggregate Depth:	2 inches above pipe
Conditions:				inches above pipe inches total
				~
WATER LINES (INCLUDING IRRIGATION) MUST	RE 10FT FROM ANY PART OF	CEPTIC CYCTEM OR	DEDVID VDEV	
NO UTILITIES ALLOWED IN INITIAL OR REPAIR		JEI HE JIJIEM ON	NLI AIN ANLA.	
**If applicable: I understand the system type specifie	d is different from the type specia	fied on the application	. I accept the specifications of	this permit.
O			Dote:	
Owner/Legal Representative Signature:	nlat or the intended use changes. The Consti	ruction Authorization shall not	he transferred when there is a change in	ownership of the site. This
Construction Authorization is subject to revocation in the site plan,				ATTACHED SITE SKETCH
	3 4			
Authorized State Agent:	Marshall	Date:	4-24-14	

Construction Authorization Expiration Date:

4-24-19

Harnett County Department of Public Health Site Sketch

ISSUED TO: Robert Crobinee Builder Forsubdivision Victoria Iti 45 LOT # 221

Authorized State Agent James & Markonta rosus

Date: 4-24-14

