HTE#<u>14-5=33623</u>

Harnett County Department of Public Health

27879

Improvement Permit

A	building permit cannot be issued with only an Improvement	Bacces T87050 RD
ISSUED TO CAME Rob Tason Home	SUBDIVISION JEHOS PA	
NEW REPAIR EXPANSIO		equired prior to Construction Authorization Issuance:
Type of Structure:		•
Proposed Wastewater System Type: 25 2 None	Mor	
Projected Daily Flow: GPD		
Number of bedrooms: Number of Occup	ants: max	
Basement □Yes □ No □ May be requi	red based on final location and elevations of facilities	
	red based on final location and elevations of facilities Well Distance from well feet	Permit valid for: Five years
Permit conditions:	Well Distance from Well feet	No expiration
	_	— IN CAPITATION
51		
Authorized State Agent::	Date: 5-22-1	SEE ATTACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guaran	tees the issuance of other permits. The permit holder is responsible for c	hecking with appropriate governing bodies in meeting their requirements. This
site is subject to revocation if the site plan, plat, or the intended use of the Laws and Rules for Sewage Treatment and Disposal and to condition	langes. The Improvement Permit shall not be affected by a change in ow	nership of the site. This permit is subject to compliance with the provisions of
	, 5, and political	
	Construction Authorization	
The course of a cold in the course of the 1959-1952-19	(Required for Building Permit)	
with the attached system layout.	'54, .1955, .1956, .1957, .1958. and .1959 are incorporated by reference	s into this permit and shall be met. Systems shall be installed in accordance
ISSUED TO: CAM Roberton Ho	PROPERTY LOCATION: Sec 10	434 Ballice - Tohuson RD
10. <u>-1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1</u>	SUBDIVISION TOLANS	134 Bruck Johnson RD LOT # 45
Facility Type: SFD	New □ Expansion □ Repair	ω μοι π μ
Basement? Yes No Basement Fixt		
	5% Reduction System	(Initial) Wastewater Flow: 360 GPD
(See note below, if applicable \square)	see les sed et 2 spread	(mittal) Wastewater Flow OID
The Late of the Control of the Late of the	75% / CB7 (Repair)	
Installation Requirements/Conditions	Number of trenches (Repair)	
Septic Tank Size / 600 gallons	Exact length of each trench 80 feet	Trench Spacing: Feet on Center
Pump Tank Size / 6 6 gallons	Trenches shall be installed on contour at a	Soil Cover: 6 inches
Pump Tank Size gallons	Maximum Trench Depth of: 14-)18 inches	
	(Trench bottoms shall be level to +/-1/4"	(Maximum soil cover shall not exceed 36" above the trench bottom)
	`	30 above the trench bottom)
Duma Danviramento (4 TDU	in all directions)	6
Pump Requirements:ft. TDH vs	_ GPM	inches below pipe
Can Hataman		Aggregate Depth: inches above pipe
Conditions:	· · · · · · · · · · · · · · · · · · ·	inches total
WATER LINES (INCLUDING IRRIGATION) MUST B		REPAIR AREA.
NO UTILITIES ALLOWED IN INITIAL OR REPAIR D	RAIN FIELD AREA.	
**If applicable: / understand the system type specified	is different from the type specified on the application	n I accent the specifications of this permit
n appreciate. Tanderstand the system type specified	is uncreme from the type specified on the application	i. I accept the specifications of this permit.
Owner/Legal Representative Signature:		Date:
This Construction Authorization is subject to revocation if the site plan, p		· · · · · · · · · · · · · · · · · · ·
Construction Authorization is subject to compliance with the provisions of	the Laws and Rules for Sewage Treatment and Disposal and to the cond	tions of this permit. SEE ATTACHED SITE SKETCH
ئو		
Authorized State Agent:	Construction Authorization Expiration	5-22-14
	Construction Authorization Expiration	Date: 37-27-19

HTE# 14-5-33623

Permit # 27879

Harnett County Department of Public Health Site Sketch

	PROPERTY LOCATON: 521434 Bruce 7 SUBDIVISION JEHRS JE FA	chsz Ro
ISSUED TO: GAMY ROBERSON Hom	SUBDIVISION JOHNSUZ FITTS	LOT # <u>45</u>
Authorized State Agent: 5 Man	Date: 5-	22-14

Forgs wen Probably Be Needled.

