HTE# <u>/4-5-34255</u>	Harn		•	ent of Pub	lic Health	28055
<u>Improvement Permit</u> A building permit cannot be issued with only an Improvement Permit						
á o	A			only an Improvemen ION: <u>Hwy Yo</u> 1		
ISSUED TO MARTY TA	ant Casto	n Homes	SUBDIVISION	South Nic	Se Forms	LOT # 42
	EXPANSIO				quired prior to Construction Aut	•
	SFD		-			
Proposed Wastewater System Type:		ww	-			
Projected Daily Flow: <u>360</u> Number of bedrooms: <u>3</u>		ants:	max			
Basement $\Box$ Yes $\Box$ No		aints	_111aA			
Pump Required: 🗆 Yes 🗆 No	🛛 May be requi	red based on final lo	ocation and elevat	ions of facilities	,	
Type of Water Supply:  Commun Permit conditions:	· · ·	🗆 Well Distan			Permit valid for:	Five years
A	ــــــــــــــــــــــــــــــــــــــ	A 1 A	10			
Authorized State Agent:	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	Ashont	Date:	8-1-1	Y SEE	ATTACHED SITE SKETCH
The issuance of this permit by the Health De	partment in no way guaran	tees the issuance of other	r permits. The permit	holder is responsible for ch	ecking with appropriate governing bodie	es in meeting their requirements. This
site is subject to revocation if the site plan, the Laws and Rules for Sewage Treatment an			Permit shall not be a	ffected by a change in own	ership of the site. This permit is subject	t to compliance with the provisions of
the Laws and holes for sewage freatment an	a Disposal and to continuon	s of this perant.				
		Constr	uction Aut	horization		
The construction and installation requirement	s of Rules 1950 1957 19		uired for Buildi		; into this permit and shall be met. Svs	tems shall be installed in accordance
with the attached system layout.	5 61 Hales, 50,, 52,	,			· ···· · ··· · · · · · · · · · · · · ·	
ISSUED TO: Manty Time	Cush do		PROPERTY	LOCATION Han	« 4/07 A)	
ISSUED TO. TOTOMENTING	Custon Mor			N Sandt A	ESGA. Form	LOT # 42
Facility Type:SF	D	New	$\Box_{\mathcal{L}}$ Expansi	ion 🗌 Repair		
Basement? Ves N	o Basement Fixt		No			
	000 000		Syste	•	(Initial) Wastewater Flo	w: <u>360</u> GPD
Type of Wastewater System** (See note below, if applicable Installation Requirements/Condition			/			
	Pumpto	25% 74	hes 3	<u>. (</u> Repair)		
Installation Requirements/Condition	<u>ns</u>		hes <u>3</u>	<u> </u>	9	
Septic Tank Size	_ gallons	Exact length of	each trench	80 feet	Trench Spacing:	Feet on Center
Pump Tank Size	_ gallons			ntour at a	Soil Cover:	
			•	<u>-&gt;18</u> inches	•	
		(Trench bottoms		) +/-1/4"	36" above the trench	bottom)
		in all directions)				6
Pump Requirements:	ft. TDH vs	GPM			Aggregate Depth:	b inches below pipe
					Aggregate Deptn:	
Conditions:						12 inches total
WATER LINES (INCLUDING IRE				EPHC SYSTEM OK	KEPAIK AKEA.	
NO UTILITIES ALLOWED IN IN	IIIAL OK REPAIK D	IKAIN FIELD AKE	A.			
**If applicable: / understand the s	system type specified	l is different from	the type specifie	d on the applicatio	n. I accept the specifications	of this permit.
De la La contestina Constantes						
Owner/Legal Representative Signature: Date: Date:						
This Construction Authorization is subject to a Construction Authorization is subject to compl						SEE ATTACHED SITE SKETCH
construction Authorization is subject to comp	nance mini ute provisions o	I LIC LAWS AND RULES IOT		- proposed and to the cond	and of any perme. J	
Authorized State Agent: James & Manhon free Date: <u>B-1-14</u>						
Authorized State Agent: Date: Date: B-1-14 Construction Authorization Expiration Date: B-1-19						
Construction Authorization Expiration Date:						



