HTE# 14-5-34436 R Harn... County Department of Public ... ealth

27999

Improvement Permit

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: Tingen Rd. ISSUED TO: Trace Homes Gay Robinson SUBDIVISION Market place LOT #

NEW REPAIR . EXPANSION Site Improvements required prior to Construction Authorization Issuance:

Type of Structure: SFD 64x60 46x40 Proposed Wastewater System Type: 25% Reduction System Projected Daily Flow: 480 GPD Number of bedrooms: Number of Occupants: __ 8 max Basement Yes Pump Required: ☐Yes ☐ No ☐ May be required based on final location and elevations of facilities Type of Water Supply: ☐ Community ☐ Public ☐ Well Distance from well _______feet Five years Permit valid for: Permit conditions: ☐ No expiration Date: Authorized State Agent: Authorized State Agent: The issuance of this permit by the Health Department in no way guarantees the issuance of other permits. The permit holder is responsible for checking with appropriate 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 be affected by a change in ownership of the site. This permit is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.. Construction Authorization (Required for Building 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: Trace Homer Gary Robinson PROPERTY LOCATION: Tingen Rd.

SUBDIVISION Market place LOT # 92

Facility Type: SFD Expansion Repair Basement? Yes No Basement Fixtures? Yes Type of Wastewater System** 25% Reduction System (Initial) Wastewater Flow: 480 GPD (See note below, if applicable

) 25% Reduction System (Repair) Installation Requirements/Conditions Number of trenches Exact length of each trench 200 feet Trench Spacing: 9 Feet on Center Trenches shall be installed on contour at a Soil Cover: 12.24 inches Septic Tank Size /000 gallons Pump Tank Size _____ gallons Maximum Trench Depth of: 24-76 inches (Maximum soil cover shall 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 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: I 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: 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 Authorized State Agent: Sup Mc REHS Construction Authorization Expiration Date: 9/8/2019

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Harnett County Department of Public Health Site Sketch

| PROPERTY LOCATON: Tingen Rd. | |
|--|-----------|
| SSUED TO: Trace Homer Gary Robinson SUBDIVISION Market place | LOT #92_ |
| | 1 / |
| Authorized State Agent: Sup Noin REHS Date: 4/8/2019 | 12/5/2015 |

