HTE# 14-5-34666

Harnett County Department of Public Health

28078

Improvement Permit

A	building permit cannot be issued with only an Improvemer	t Permit						
0 1 1 1 11	PROPERTY LOCATION: 52/437	BALLMON RED.						
ISSUED TO: CUMBELLANCE HOY	res SUBDIVISION Ballio	LWOOPS LOT#						
NEW ☐ REPAIR ☐ EXPANSION	7	quired prior to Construction Authorization Issuance:						
Type of Structure:		'						
Proposed Wastewater System Type: 25% 708	☆							
Projected Daily Flow: GPD 48								
Number of bedrooms: Number of Occup	ants: 👺max							
Basement Yes No								
Pump Required: □Yes □ No □ May be required	ed based on final location and elevations of facilities							
Type of Water Supply: Community Public	☐ Well Distance from well feet	Permit valid for: 🗗 Five years						
Permit conditions:		No expiration						
*	1 /							
Authorized State Agent:	Arhor Date: 10-20							
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 1957 19	,	s into this permit and shall be met. Systems shall be installed in accordance						
with the attached system layout.	17, 1733, 1730, 1731, 1730. and 1737 are incorporated by reference	s mo this perime and shari be met. Systems shari be instaned in accordance						
ISSUED TO: Conhect and Hon	PROPERTY LOCATION: SKL/9	137 Balland BOD						
	SUBDIVISION DALLA	nel 10000 LOT # /						
Facility Type:								
Basement? Yes No Basement Fixt	_ /							
		(I-:4:-1) W						
Type of Wastewater System** 25% RED	0000 39112-	(Initial) Wastewater Flow: 450_ GPD						
(See note below, if applicable □)	\ _ '/							
12/21/1900	Ten Systa (Repair)							
Installation Requirements/Conditions	Number of trenches							
Septic Tank Size 1200 gallons	Exact length of each trench 100 feet	Trench Spacing: Feet on Center						
Pump Tank Size gallons	Trenches shall be installed on contour at a	Soil Cover: inches						
Samp rank size ganons	Maximum Trench Depth of: 74-16 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						
Conditions:		inches total						
WATER LINES (INCLUDING IRRIGATION) MUST B	E 10FT. FROM ANY PART OF SEPTIC SYSTEM OR	REPAIR AREA.						
NO UTILITIES ÀLLOWED IN INITIAL OR REPAIR D								
**If applicable: / understand the system type specified	is different from the type specified on the application	n. I accept the specifications of this permit.						
O		D						
This Construction Authorization is subject to represent if the city plan of	at as the intended use changer. The Construction Authorization shall no	be transferred when there is a change in awareship of the cite. This						
Owner/Legal Representative Signature:								
	111							
Authorized State Nant: Date: 10-36								
Authorized State Agent: Construction Authorization Expiration Date: 10-20-19								
Construction Authorization Expiration Date: 10-20-19								

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Permit # <u>28078</u>

Harnett County Department of Public Health Site Sketch

	0 . 1 0 .	PROPERTY	LOCATON: <u>SNY43</u> DIVISION <u>Balan</u>	7 DAllon	d RB	
ISSUED TO:	Curpelland H	SUB	DIVISION BAKAN	DWOODS	LOT #	
Authorized Sta	te Agent: 5			Date:	115-20-14	
		V			/ 	,

