HTE# 14-5-34717

Harnett County Department of Public Health

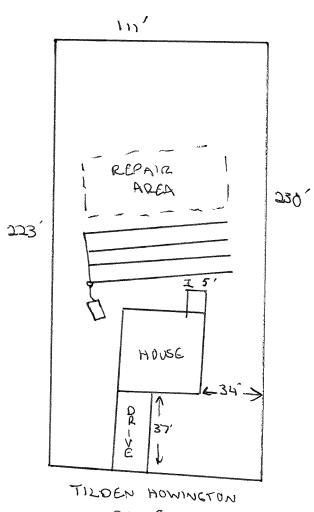
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Improvement Permit

A duliding permit cann	DEUDE ISSUED WITH	only an impro	のをment i	HOMINETON	D0	
ISSUED TO: SAVY HOMES LLC				IL RIDGE	164	LOT # 187)
NEW REPAIR □ EXPANSION □				ired prior to Construction	n Authorization	
Type of Structure: SFD (42×48)		·				
Proposed Wastewater System Type: 25% REDUCTION 5755	<u>s</u> em					
Projected Daily Flow: 480 GPD		.,				
Number of bedrooms: Number of Occupants:	_max					
Basement □Yes ▶ No						
Pump Required: ☐Yes No ☐ May be required based on final le			25		.	
,, ,,	nce from well $\frac{1}{2}$	50f	eet	Permit vali	d for:	Five years
Permit conditions:						No expiration
Authorized State Agent::		11/5/14	Δ		SEE ATTACHED	CITE CVETCU
Authorized State Agent:: The issuance of this permit by the Health Department in no way guarantees the issuance of the incompanion of the incompa			nle for check	ving with annronriate governin		
site is subject to revocation if the site plan, plat, or the intended use changes. The Improvement the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.						
Constr	uction Aut	horizatio	<u>on</u>			
(Rec	<u>quired for Buildin</u>	g Permit)				
The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .1957, with the attached system layout.				·	•	
ISSUED TO: SAVY Homes LLC	PROPERTY	LOCATION: _	TIL	DEN HOWI	15TON [) <u>r</u>
Facility Type: SFO (42×48') New	ZORDIAIZIOI			DELL KIDG	6	L01 # <u>8 /</u>
Facility Type: New New	Expansio	on 🗆 I	Repair			
Basement? Yes No Basement Fixtures? Yes	NO NO	•			150	
Type of Wastewater System** _ 25% REDUCTION	No Syste	>M		(Initial) Wastewate	r Flow:	C GPD
(See note below, if applicable)	Sylvan					
		(Repair)				
Installation Requirements/Conditions Number of trench	hes 🖰			C	à	
Septic Tank Size <u>1000</u> gallons Exact length of e	each trench <u> </u>	<u>S</u>	feet	Trench Spacing:	Feet	on Center
Pump Tank Size gallons Trenches shall be	e installed on cor	ntour at a		Soil Cover:	inches	
Maximum Trench	Depth of:	<u>8 </u>	inches	(Maximum soil cove	er shall not exc	ceed
	shall be level to			36" above the tre	nch 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 BE 10FT. FROM A	NY PART OF SE	PTIC SYSTEM	M OR RI	FPAIR ARFA		
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD AREA			•			
**If applicable: I understand the system type specified is different from a	the type specified	d on the appi	lication.	I accept the specificat	ions of this pe	rmit.
Owner/Legal Representative <u>Signature:</u> This Construction Authorization is subject to revocation if the site plan, plat, or the intended use				Date:		
This Construction Authorization is subject to revocation of 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 provision of the provision of the conditions of this permit. SEE ATTACHED SITE SKETCH						
construction Audiorization is suggested compnance with the provisions of the taws and killes for s	sewage treatment and	מ מוומ ומינים ומינים ומינים	ne conantol	is or tills permit.	JEL MITAG	ILD JIL JALICII
Authorized State Agent:	REHIZ		Date: _	11 5 74 te: 11 5 19		
Consti	ruction Authoriz	ation Expira	ation Da	te: 11519		

Harnett County Department of Public Health Site Sketch

	PROPERTY LOCATON: TILDER	4000MACTON	Da
ISSUED TO: SEXY HOMES LLC	SUBDIVISION MAMIE	BELL RIDGE	LOT # 87
	1	1 1 .	
Authorized State Agent:	FHR COLIVES TOTASOOR	Date: 17 5 77	



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