HTE# 14-5-34913

Harnett County Department of Public Health

28094

Improvement Permit

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: 30 1774 SAIT Market ____ SUBDIVISION __ Site Improvements required prior to Construction Authorization Issuance: Type of Structure: Proposed Wastewater System Type: 25% TORIBULTUS Projected Daily Flow: 650 GPD Number of Occupants: 10 Number of bedrooms: 5 Basement □Yes May be required based on final location and elevations of facilities Pump Required: ☐Yes ☐ No Type of Water Supply:

Community Public

Well Distance from well _______ feet Five years Permit valid for: Permit conditions: ■ No expiration Authorized State Agent:

Date: 1-20-14

SEE ATTACHED SITE SKETCH

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 it 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: Martha 5 Candia PROPERTY LOCATION: 5x 1774 Salt Market

CHRONIVISION _____ LOT # 8 Basement Fixtures? Yes No 25% RADUCTUD Sys to (Initial) Wastewater Flow: 600 GPD Type of Wastewater System** (See note below, if applicable) Purp 25% 10300000 (Repair) Installation Requirements/Conditions Exact length of each trench /60 feet Trench Spacing: Feet on Center Trenches shall be installed on contour at a Soil Cover: inches Septic Tank Size 1500 gallons Pump Tank Size _____ gallons Maximum Trench Depth of: $22 \rightarrow 18$ 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 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 SEE ATTACHED SITE SKETCH 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. Date: 11-20-14 Authorized State Agent:

Harnett County Department of Public Health Site Sketch

Authorized State Agent:	FAYEHEVILLE STREET Date: 11-20-14	
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