HTE# 15-5-35660 Harnett County Department of Public Health

28353

Improvement Permit

PROPERTY LOC	ATION: SLISST TO CO 12D
ISSUED TO: RED DOOR Homes of Fryethevella SUBDIVISION	
NEW REPAIR C EXPANSION C	Site Improvements required prior to Construction Authorization Issuance:
Type of Structure:	
Proposed Wastewater System Type: 250/6 REDUCTION	
Projected Daily Flow: 600 GPD	
Number of bedrooms: S Number of Occupants: 10 max	
Basement Yes No	
Pump Required: ☐Yes ☐ No ☐ May be required based on final location and elev	rations of facilities
Type of Water Supply: Community Public Well Distance from well Permit conditions:	feet Permit valid for: 🗹 Five years 🗆 No expiration
1 745	
Authorized State Agent: Date:	4-2-15 SEE ATTACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guarantees the issuance of other permits. The perm site is subject to revocation if the site plan, plat, or the intended use changes. The Improvement Permit shall not be the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.	nit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This
Construction A	uthorization
(Required for Buil	
The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .1957, .1958. and .1959 with the attached system layout.	
ISSUED TO: <u>Red Door Homes of Fryettevalles</u> PROPERTS SUBDIVIS	Y LOCATION: 32557 TO CO RD
SUBDIVIS Facility Type: New Expa Basement? Yes No No Subdivis S	nrien Rennir
racility type: I wew Lxpa	плон — перан
Basement! Yes No Basement Fixtures! 1es No	(Initial) Wastewater Flow: 600 GPD
Type of Wastewater System" 23% 10650 05 600 3731 72	(illitial) Wastewater flow Gi b
(See note below, if applicable □)	(0,;)
Installation Requirements/Conditions Number of trenches 2	(nepair)
	Zoo feet Trench Spacing: Feet on Center
Pump Tank Size gallons Trenches shall be installed on	
Maximum Trench Depth of: 3	
(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
Conditions: Contractor to neer a	Aggregate Depth: Z inches above pipe ON SITE PRIOR 1Z inches total
Conditions: CONTRACTOR TO THEEL C	THE STATE OF THE S
WATER LINES (INCLUDING IRRICATION) MILET DE 10ET EDOM ANY DART OF	CEDTIC CYCTEM OD DEDAID ADEA
WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM ANY PART OF NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD AREA.	SEF IIC STSTEM OR RELAIN AREA.
**If applicable: I understand the system type specified is different from the type specified	ified on the application. I accept the specifications of this permit.
Owner/Legal Representative Signature:	Date:
Owner/Legal Representative Signature:	ruction 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: SManhant	Date: <u>4-2-75</u> orization Expiration Date: <u>4-2-20</u>
Construction Auth	orization Expiration Date: <u> </u>

Harnett County Department of Public Health Site Sketch

