HTE# 15-535709

Harnett County Department of Public Health

28323

Improvement Permit

A building permit cannot be issued with only an Improvement Permit				
H-11 0 11	PROPERTY LOCATION	N. BRIGGS		11
ISSUED TO: H+H ONSITE HO	MES LCC SUBDIVISION	Barges F		LOT # <u>18</u>
NEW REPAIR (56°×44°)	□ Si	te Improvements requ	uired prior to Construction Authoriza	tion Issuance:
Type of Structure: SFD (56">444") Proposed Wastewater System Type: 25% R60				
Proposed Wastewater System Type: 45 70 KGO	005 142 - NJ 10W			
Projected Daily Flow: 480 GPD	. 9			
Number of bedrooms: Number of Occupa	nts: 8 max			
Basement		- of fedition		
	ed based on final location and elevation Well Distance from well 15	15 Of Tacilities	Permit valid for:	□ Eive veere
Type of Water Supply: Community Public Permit conditions:	Well Distance from Well	O leet	i cillit vanu lui.	☐ Five years☐ No expiration
Territe Conditions.				La no expiration
Authorized State Agent::	PGNS Date: L	1/29/15	SEE ATTAC	HED SITE SKETCH
The issuance of this permit by the Health Department in no way guarant				
site is subject to revocation if the site plan, plat, or the intended use ch	anges. The Improvement Permit shall not be affec			
the Laws and Rules for Sewage Treatment and Disposal and to conditions	of this permit			
	Construction Auth	orization		
	(Required for Building	Permit)		
The construction and installation requirements of Rules .1950, .1952, .195			nto this permit and shall be met. Systems sh	all be installed in accordance
with the attached system layout.				
ISSUED TO: HAM ONSIZE HOM	SS 17C DRADERTY IC	CATION. BO	1665 RD	
1330ED 10: 11.11 C 43116 1101	TRUFERIT LU	Berces	Frons	LOT # 1/8
1 TO 1 SEO (SC 'X) 2) C	20DUIVISION		י אייייייייייייייייייייייייייייייייייי	LUI # _16
Facility Type: 550 (56 ×44) New Expansion Repair				
Basement? Yes No Basement Fixtures? Yes No				
Type of Wastewater System** 25% REDUCTION SYSTEM (Initial) Wastewater Flow: 480 GPD				
(See note below, if applicable □)				
257. W	ADUCTION SYSTEM	Repair)		
Installation Requirements/Conditions	Number of trenches 3	_	Ø	
Septic Tank Size 1000 gallons	Exact length of each trench 8	C feet	Trench Spacing: F	eet on Center
Pump Tank Size gallons	Trenches shall be installed on conto	our at a	Soil Cover: 12-24 inc	:hes
,	Maximum Trench Depth of: 24	136 inches	(Maximum soil cover shall no	t exceed
	(Trench bottoms shall be level to		36" above the trench bottor	m)
	in all directions)			,
Pump Requirements:ft. TDH vs	GPM			inches below pipe
		_	Aggregate Denth:	inches above nine
Conditions: SEE SIXE SRET	CH PRIOR 10	STUBBLA	7. G	inches total
Conditions: SEE SITE SRET				menes total
WATER LINES (INCLUDING IRRIGATION) MUST B		IIC 2121FW OK K	EPAIK AKEA.	
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DI	AIN FIELD AREA.			
**If applicable: / understand the system type specified	is different from the type specified	on the annlication	I accent the specifications of the	s nermit
- 11 applicable. I understand the system type specimed	s amerene nom ene type speemed	on the appreciation	i accept the specifications of the	, perima
Owner/Legal Representative Signature: Date:				
This Construction Authorization is subject to revocation if the site plan, plants	at or the intended use changes. The Construction	Authorization shall not be		erchin of the cite 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.				
A Proposition of the Proposition		,		
Authorized State Acents	D P6+15	Date:	4/29/10	
Authorized State Agent:			4 hadre	
	Construction Authorizat	tion Expiration Da	ite: 127 20	

Harnett County Department of Public Health Site Sketch

