HTE#<u>15-5-3596</u>4

Harnett County Department of Public Health

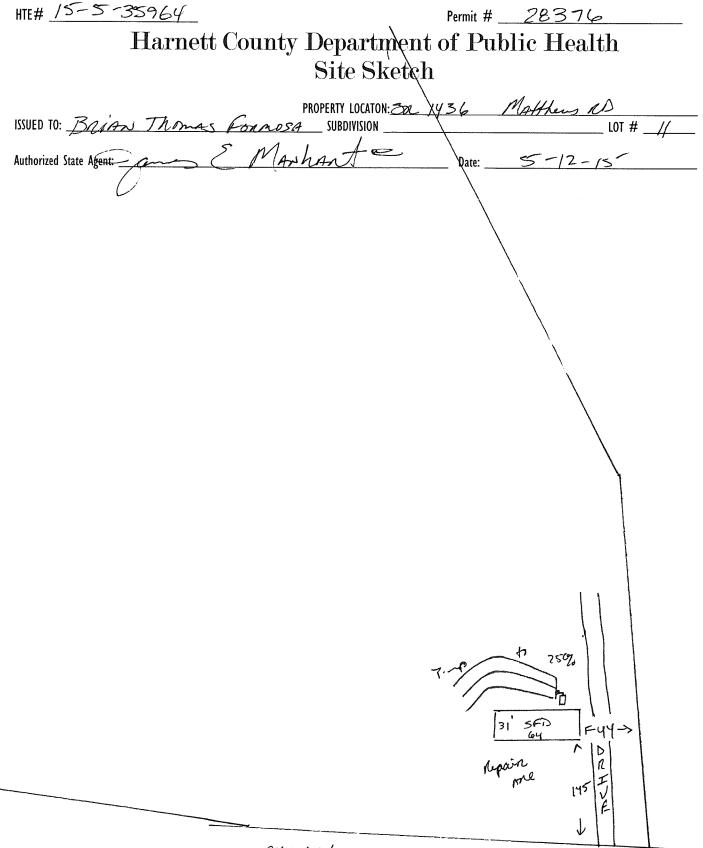
Improvement Permit

	A building permit cannot be issued wi	ith only an Improvement	Permit MAtthem N	ろ	
ISSUED TO: BRIAN THOMAS FO	2mosa SUBDIVISION			LOT # //	
NEW 🗹 REPAIR 🗆 EXPANSI					
Type of Structure: SPD					
Proposed Wastewater System Type: 25% 7.2130	4202				
Projected Daily Flow: <u>360</u> GPD	1				
Number of bedrooms: Number of Occu	ipants: <u> (</u>				
Basement Yes No		······			
	uired based on final location and elev		D 1/2 /1/2 /	Tr:	
Type of Water Supply: Community Public Permit condition:			Permit valid for:	Five years	
Permit conditions:				No expiration	
	All				
Authorized State Agent:	Ashon Date:			TACHED SITE SKETCH	
The issuance of this permit by the Health Department in no way guara	antees the issuance of other permits. The permi	it holder is responsible for che	cking with appropriate governing bodies i	n meeting their requirements. This	
site is subject to revocation H-the site plan, plat, or the intended use the Laws and Rules for Sewage Treatment and Disposal and to condition		e affected by a change in owne	rship of the site. This permit is subject to	o compliance with the provisions of	
	Construction Au	Ithorization		· · · · · · · · · · · · · · · · · · ·	
	(Required for Build				
The construction and installation requirements of Rules .1950, .1952, . with the attached system layout.	1954, .1955, .1956, .1957, .1958. and .1959 a	are incorporated by references	into this permit and shall be met. System	is shall be installed in accordance	
ISSUED TO: Bring Thomas F		V LOCATION S	s Malle	10	
ISSUED TO. JACONTO TANK	CUDDIVICI	T LUCATION: $\underline{\sigma - \gamma}$	36 Atthews N	LOT # //	
				LUI # _//	
Facility Type: Basement?		ision 🗀 kepair			
Basement? Ves No Basement Fix	(tures?] Yes ? No		(Initial) All stands on Fla	360 000	
Type of Wastewater System** <u>25% 7287</u>	JUUDBASTEL		(Initial) wastewater flow:		
(See note below, if applicable □) <u>25%</u> ルティ	Carous	(Repair)			
Installation Requirements/Conditions	Number of trenches		9		
Septic Tank Size <u>1030</u> gallons	Exact length of each trench	100 feet	Trench Spacing:	_ Feet on Center	
Pump Tank Size gallons	Trenches shall be installed on c		Soil Cover:	inches	
	Maximum Trench Depth of: <u>2</u>	inches	(Maximum soil cover shall	not exceed	
	(Trench bottoms shall be level	to +/-1/4"	36" above the trench bot	ttom)	
	in all directions)				
Pump Requirements:ft. TDH vs	GPM		6	inches below pipe	
			Aggregate Depth:	inches above pipe	
Conditions: <u>SIABHONE</u>	IF (ONBLY	6 IS TO	<u>></u>	12 inches total	
DEFI - PUMY	DEL BE	CQUERE	2		
WATER LINES (INCLUDING IRRIGATION) MUST	BE 10FT, FROM ANY PART OF S	SEPTIC SYSTEM OR R	FPAIR ARFA		
NO UTILITIES ALLOWED IN INITIAL OR REPAIR I					
**If applicable: I understand the system type specified	t is different from the type specifi	ied on the application.	I accept the specifications of	this permit.	
Owner/Legal Representative Signature:			Date:		
Owner/Legal Representative Signature: Date:					
construction Authorization is subject to compliance with the provisions of	I THE LAWS AND KULES FOR Sewage Treatment an	nd Disposal and to the condition	ins of this permit. SEE	ATTACHED SITE SKETCH	
Authorized State Agent:	Mal- #	Date:	5-17-15	-	
numorized state needle	1 UTANZV	Date	- 12/3		

Construction Authorization Expiration Date: _

-12-20

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CHESLEY W