HTE#/5-5-36254 Harnett County Department of Public Health

28399

Improvement Permit

	A building permit cannot be issued wi	th only an Improvement	Permit	S- 11
ISSUED TO: Charl Anders	SUBDIVISION _	Allun: BR 110	OAR VAlley P	LOT # 14
	SION 🗆	Site Improvements rea	quired prior to Construction Author	rization Issuance:
Type of Structure:	9			
Proposed Wastewater System Type: 2720 128- Projected Daily Flow: 3 GPD GPD	Duou-			
	cupants:max			
Basement Yes No	upantsmax			
Pump Required: ☐Yes ☐ No ☐ May be re	quired based on final location and elev	ations of facilities		
Type of Water Supply: Community Public Permit conditions:	☐ Well Distance from well	feet	Permit valid for:	☐ Five years ☐ No expiration
	711/		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Authorized State Agent:	Annon Date:	6-16-		ACHED SITE SKETCH
The issuance of this permit by the Health Department in no way gua site is subject to revocation if the site plan, plat, or the intended us the Laws and Rules for Sewage Treatment and Disposal and to condit	e changes. The Improvement Permit shall not be	it holder is responsible for che affected by a change in own	cking with appropriate governing bodies in ership of the site. This permit is subject to	meeting their requirements. This compliance with the provisions of
	Construction Au	ıthorization		
	(Required for Build	ling Permit)		
The construction and installation requirements of Rules .1950, .1952, with the attached system layout.				
ISSUED TO: Chad Anders	PROPERT SUBDIVISI	Y LOCATION: <i>参んぱ</i> on	710 OAK Valley 6	An RS
Facility Type:	New _ Expan	sion 🗆 Repair		LOI # _/V
	ixtures? Yes No	зіон — перан		
	Lemura Sys	t13-	(Initial) Wastewater Flow:	360 GPD
(See note below, if applicable \square)	Reduction	(Repair)	()	
Installation Requirements/Conditions	Number of trenches 3	(
Septic Tank Size /OOD gallons	Exact length of each trench	/O feet	Trench Spacing:	Feet on Center
Pump Tank Size gallons	Trenches shall be installed on o			inches
, c	Maximum Trench Depth of:	24-318 inches	(Maximum soil cover shall	not exceed
	(Trench bottoms shall be level		36" above the trench bot	tom)
	in all directions)		/	
Pump Requirements:ft. TDH vs	GPM		6_	inches below pipe
Conditions:			Aggregate Depth:	inches above pipe inches total
NATED LINES (INCLUDING IDDICATION) MICE	DE TOTT EDOM ANY DADT OF C	TENTIC CVCTEM ON I	DEDAID ADEA	
NATER LINES (INCLUDING IRRIGATION) MUST NO UTILITIES ALLOWED IN INITIAL OR REPAIR		EFIIC STSIEMI UK I	KEFAIK AKEA.	
**If applicable: / understand the system type specific	ed is different from the type specifi	ed on the application.	I accept the specifications of	this permit.
Owner/Legal Representative Signature:			Date:	
This Construction Authorization is subject to revocation if the site plan Construction Authorization is subject to compliance with the provisions				wnership of the site. This ATTACHED SITE SKETCH
Authorized State Agent:	Makas	A	/ // /5-	

Construction Authorization Expiration Date: ____

Harnett County Department of Public Health Site Sketch

	PROPERTY LOCATON 52191	ODAK	VAlleyFARE RS
ISSUED TO: Chad Anderson	SUBDIVISION		/ LOT # _A
À .1			7
Authorized State Agent:	whent	Date:	6-16-15

