HTE# <u>15-5-366</u> 39 Harn		•		ic Health	28476
	lm	<u>provement Pe</u>	rmit		
Α	building permit can	not be issued with only	an Improvement		11 marth an
ISSUED TO: FRANK FARM		PROPERTY LOCATION:		DAK GLOVEC	HUICH (05)
ISSUED TO: 17CH N -7H UM			· ·	ired prior to Construction A	$\underline{\qquad}$ LOI # $\underline{\qquad}$
Type of Structure: SFD			improvements requ		athonization issuance.
Proposed Wastewater System Type: 25% CWF	weren	<u>}</u>			
Projected Daily Flow: 360 GPD	1				
Number of bedrooms: Number of Occu	pants:	_max			
Basement Yes No	·		- (fo -: 11 4 1		
Type of Water Supply: Community Public		ocation and elevations nce from well		Permit valid fo	•
Permit conditions:					No expiration
	_	1			······································
Authorized State Agent:	Manhard	Date:	8-3-15	SE	E ATTACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guara site is subject to revocation if the site plan, plat, or the intended use the Laws and Rules for Sewage Treatment and Disposal and to conditio	changes. The Improvement	r permits. The permit holder	is responsible for chec by a change in owner	king with appropriate governing be ship of the site. This permit is sub	idies in meeting their requirements. This ject to compliance with the provisions of
	Constr	uction Autho	rization		
		quired for Building P			
The construction and installation requirements of Rules .1950, .1952, . with the attached system layout.				nto this permit and shall be met. :	Systems shall be installed in accordance
ISSUED TO: FRANK FAILMBE	2	DDODEDTV IOC	ITION SA 15	32 Nak Came	CHAN
			THE HO	nester	LOT # 10
Facility Type:	New New	Expansion	Repair		
	ctures? 🗆 Yes	No			
Type of Wastewater System** 25% REi	NUTION	System		(Initial) Wastewater F	low: <u>360</u> GPD
(See note below, if applicable)		/		、 ,	
Pumpt	3 25% RU	2DUCTUR?	bair)		
Installation Requirements/Conditions	Number of trend	thes <u>Z</u>		G	,
Septic Tank Size 1000 gallons	Exact length of	each trench _15	<u> </u>	Trench Spacing:	Feet on Center
Pump Tank Size gallons		e installed on contou		Soil Cover:	
				(Maximum soil cover s	
	(Trench bottoms	shall be level to +/	-1/4"	36" above the trench	n bottom)
	in all directions))			1
Pump Requirements:ft. TDH vs	GPM				inches below pipe <u>2</u> inches above pipe
Conditions:				Aggregate Depth:	<u> </u>
WATER LINES (INCLUDING IRRIGATION) MUST			C SYSTEM OR R	EPAIR AREA.	
NO UTILITIES ALLOWED IN INITIAL OR REPAIR	DRAIN FIELD ARE	Α.			
<u>**If applicable: I understand the system type specifie</u>	d is different from	the type specified on	the application.	I accept the specification	is of this permit.
Owner/Legal Representative Signature:				Date:	
Construction Authorization is subject to compliance with the provisions	of the Laws and Kules for	sewage treatment and Dispo	isal and to the condition	ons or this permit.	SEE ATTACHED SITE SKETCH
Authorized State Agent:	E MAr	honto	Date:	<u>8-3-75</u> ate: <u>8-3-</u>	
- / /	ິ Cons	truction Authorization	on Expiration D	ate: <u>8-3-</u>	- 70

