HTE# 15-5-36675 Harne	ett County	Departme	nt of Pub	lic Health	28558
Improvement Permit					
A t	ouilding permit cannot			t Permit	
PILAN				5 Bannette	
ISSUED TO: Conhection Home		SUBDIVISION D			loss LOT # 2
NEW C REPAIR C EXPANSION		Sit	e Improvements re	quired prior to Constructi	on Authorization Issuance:
Type of Structure:					
Proposed Wastewater System Type: 25% 7.8.00 Projected Daily Flow: 360 GPD	an				
Number of bedrooms: Number of Occupa	ints: Com		80 FBI - 11		
Basement $\Box$ Yes $\Box$ No		an			
	ed based on final loca	ation and elevation	s of facilities		
		from well		Permit val	id for: 🛛 Five years
Permit conditions:					No expiration
Authorized State Agent: The issuance of this permit by the Health Department in no way guarante site is subject to revocation if the site plan, plat, or the intended use cha				ecking with appropriate governi	
the Laws and Rules for Sewage Treatment and Disposal and to conditions		ction Auth	rization	n <u>y F</u>	
		ction Auth			
-	and manager investigation of the	red for Building	· · · · · · · · · · · · · · · · · · ·		
The construction and installation requirements of Rules .1950, .1952, .195 with the attached system layout.	54, .1955, .1956, .1957, .1	958. and .1959 are inc	orporated by reference	into this permit and shall be r	net. Systems shall be installed in accordance
ISSUED TO: Cumherton of Homes	FAC			Keell M	# Contral RA and ~ 101 # Z
Facility Type:SED	New New	Expansion	Repair	Jure Ju	
Basement? Ves No Basement Fixtu	the second second second	No	i nepun		
Type of Wastewater System** Pump to 2		WLARD		(Initial) Wastewate	er Flow: <u>360</u> GPD
(See note below, if applicable [])			5-546 - 5441 - 35	(	
Punto	28 20 728	Survey A	epair)		
Installation Requirements/Conditions	Number of trenche	4	. ,		0
Septic Tank Size 1000 gallons	Exact length of ea	ch trench lai	) feet	Trench Spacing:	Feet on Center
Pump Tank Size 1000 gallons	Trenches shall be i			Soil Cover:	inches
	Maximum Trench D				
	(Trench bottoms sh			36" above the tr	
	in all directions)				,
Pump Requirements:ft. TDH vs	GPM				C inches below pipe
				Aggregate Depth:	inches below pipe inches above pipe inches total
Conditions:					12 inches total
WATER LINES (INCLUDING IRRIGATION) MUST B		Y PART OF SEPT	IC SYSTEM OR	REPAIR AREA.	
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DI	KAIN FIELD AREA.		*		
<u>**If applicable:</u> I understand the system type specified	is different from the	e type specified o	on the application	n. I accept the specifica	tions of this permit.
Owner/Legal Representative Signature:				Date:	
Owner/Legal Representative Signature: Date:					
Construction Authorization is subject to compliance with the provisions of	the Laws and Rules for Sev	vage Treatment and Dis	posal and to the condi	tions of this permit.	SEE ATTACHED SITE SKETCH
Authorized State Agent:	Marton	H=	Date:	10-7-	15
11	Constru	ction Authorizat	ion Expiration		7-20

HTE# 15-5-36675 Permit # 28558 Harnett County Department of Public Health Site Sketch ISSUED TO: Unhalmed Homy INC SUBDIVISION BRIAN Kerth Merche LOT # 2 Authorized State Agent: James & Manhante Date: 10-7-15-

