HITE# 15-5-36807 Harnett County Department of Public Health

28484

Improvement Permit

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION SULJ448 ATTASS RD NEW 🗹 EXPANSION 🗆 Site Improvements required prior to Construction Authorization Issuance: Type of Structure: Proposed Wastewater System Type: 25% Resurvivo Projected Daily Flow: Number of bedrooms: ☐ May be required based on final location and elevations of facilities Pump Required: 121Yes □ No Type of Water Supply:

Community Five years Permit valid for: Permit conditions: ☐ No expiration The issuance of this permit by the Health Department in no way guarantees the issuance of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This site is subject to revocation if the site plan, plat, or the intended use changes. The Improvement Permit shall not be affected by a change in ownership of the site. This permit is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit... **Construction Authorization** (Required for Building Permit) The construction and installation requirements of Rules .1950, .1954, .1955, .1954, .1955, .1956, .1957, .1958. and .1959 are incorporated by references into this permit and shall be met. Systems shall be installed in accordance with the attached system layout. (See note below, if applicable [])

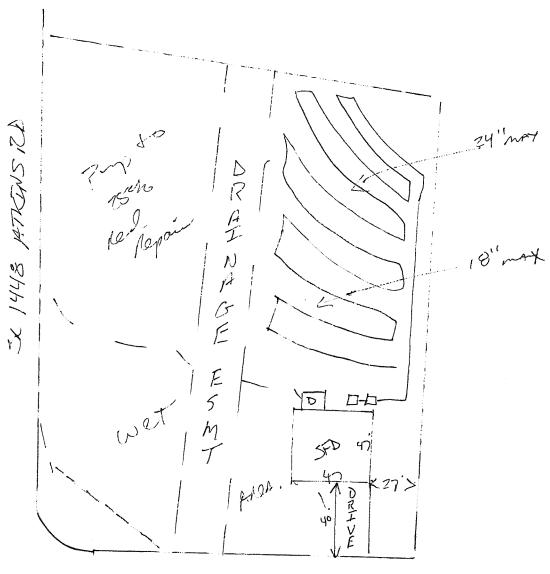
| Pump to ZSto Na Duck (Repair)
| Installation Requirements/Conditions | Number of trenches []
| Exact length of each trench 300 Pump Tank Size 1000 gallons Maximum Trench Depth of: $24 \rightarrow 18$ inches (Maximum soil cover shall not exceed (Trench bottoms shall be level to +/-1/4" 36" above the trench bottom) in all directions) Aggregate Depth: ______ inches below pipe inches above pipe Pump Requirements: ft. TDH vs. GPM WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM ANY PART OF SEPTIC SYSTEM OR REPAIR AREA. NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD AREA. **If applicable: I understand the system type specified is different from the type specified on the application. I accept the specifications of this permit. Owner/Legal Representative Signature: _ This Construction Authorization is subject to revocation if the site plan, plat, or the intended use changes. The Construction Authorization shall not be transferred when there is a change in ownership of the site. 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. SEE ATTACHED SITE SKETCH Authorized State Agent: Construction Authorization Expiration Date: 9,-24-25

HTE#	15-5-	36807

Permit # _ 28484

Harnett County Department of Public Health Site Sketch

	PROPERTY LOCATON: 🝣 144	18 ATKINS PID	
ISSUED TO: Comfort Homes INC	SUBDIVISION		LOT #/
Authorized State Agent: MANI	hom JOHN REHS	Date: 8-24-15	



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