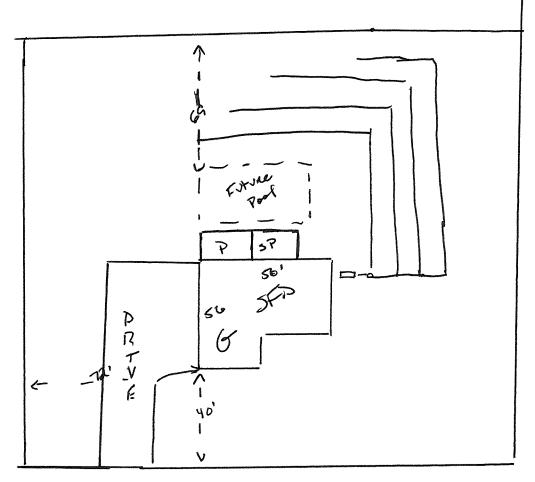
			28496
	Improvement Permit		
	A building permit cannot be issued with only an Improvemen	t Permit	
Abo A Plan D.	PROPERTY LOCATION: 17 may	12	
ISSUED TO: CHARLE GLASGON	subdivision Buck Hor		LOT #(
SC	ION Site Improvements re	quired prior to Construction Author	ization Issuance:
Type of Structure: Proposed Wastewater System Type: ZSB (285)	NAZ ZINI		
Projected Daily Flow: <u>3 (a)</u> GPD			
	upants: max		
Basement 🗆 Yes 🗹 No	·		
	uired based on final location and elevations of facilities		
	□ Well Distance from well feet	Permit valid for:	Five years
Permit conditions:			\Box No expiration
	AI A		
Authorized State Agent	Ander Date: 9-1-1	SEE ATT	ACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guar	cantees the issuance of other permits. The permit holder is responsible for ch changes. The Improvement Permit shall not be affected by a change in own ons of this permit.	ecking with appropriate governing bodies in ership of the site. This permit is subject to	meeting their requirements. This compliance with the provisions of
The construction and installation requirements of Rules .1950, .1952, . with the attached system layout.	<u>Construction Authorization</u> (<u>Required for Building Permit</u>) .1954, .1955, .1956, .1957, .1958. and .1959 are incorporated by references		shall be installed in accordance
ISSUED TO: Charles GTASGO			
	U PROPERTY LOCATION: 1429	642	
130ED 10	PROPERTY LOCATION: _/+>> SUBDIVISION _SVCK11D7	yyz NFAMMS	LOT # (6
	SUBDIVISION SUCKITOT	y 42 NAAMS	LOT # <u>(</u>
Facility Type: Basement?	🖸 New 🔲 Expansion 🔲 Repair ixtures? 🗆 Yes 🖾 No		
Facility Type: Basement?	🖸 New 🔲 Expansion 🔲 Repair ixtures? 🗆 Yes 🖾 No		
Facility Type: Basement?	<u> </u>		
Facility Type: Basement?	🖸 New 🔲 Expansion 🔲 Repair ixtures? 🗆 Yes 🖾 No		
Facility Type:	<u> </u>	(Initial) Wastewater Flow:	<u> </u>
Facility Type: Basement? □ Yes □ No Basement Fi Type of Wastewater System** <u>252</u> 化分子 (See note below, if applicable □) <u>254 PGD</u> Installation Requirements/Conditions Septic Tank Size <u>/ 000</u> gallons	<u> </u>	(Initial) Wastewater Flow: Trench Spacing:	うく_の GPD
Facility Type: Basement? □ Yes □ No Basement Fi Type of Wastewater System** <u>252</u> 化分子 (See note below, if applicable □) <u>254 PGD</u> Installation Requirements/Conditions Septic Tank Size <u>/ 000</u> gallons	<u> </u>	(Initial) Wastewater Flow: Trench Spacing: Soil Cover:	GPD
Facility Type: Basement? □ Yes □ No Basement Fi Type of Wastewater System** <u>252</u> 化分子 (See note below, if applicable □) <u>254 PGD</u> Installation Requirements/Conditions Septic Tank Size <u>/ 000</u> gallons	2 New ☐ Expansion ☐ Repair ixtures? ☐ Yes 2 No Image: Work and the second se	(Initial) Wastewater Flow: Trench Spacing: Soil Cover: (Maximum soil cover shall	<u> </u>
Facility Type:	△ New □ Expansion □ Repair ixtures? □ Yes ○ No ivertime Signature (Repair) No No Number of trenches	(Initial) Wastewater Flow: Trench Spacing: Soil Cover: (Maximum soil cover shall 36" above the trench bot	Seet on Center inches not exceed tom)
Facility Type:	I New ☐ Expansion ☐ Repair ixtures? ☐ Yes ☐ No ixtures? ☐ Yes ☐ No ixtures? ☐ Yes ☐ No ixtures? ☐ Yes ☐ No ixtures? ☐ Yes ☐ No ixtures? ☐ Yes ☐ No ixtures? ☐ Yes ☐ No ixtures? ☐ Yes ☐ No ixtures? ☐ Yes ☐ No ixtures? ☐ Yes ☐ No ixtures? ☐ Yes ☐ No ixtures? ☐ Yes ☐ No ixtures? ☐ Yes ☐ No ixtures? ☐ Yes ☐ No ixtures? ☐ Yes ☐ No ixtures? ☐ Yes ☐ No ixtures? ☐ Yes ☐ No ixtures? ☐ Yes ☐ No ixtures? ☐ Yes ☐ No ixtures? ☐ Yes ☐ No ixtures? ☐ Yes ☐ Yes ☐ No ixtures ☐ Yes ☐	(Initial) Wastewater Flow: Trench Spacing: Soil Cover: (Maximum soil cover shall 36" above the trench bot	<u>S</u> GPD Feet on Center inches not exceed tom)
Facility Type:	I New ☐ Expansion ☐ Repair ixtures? ☐ Yes ☐ No ixtures? ☐ Yes ☐ No ixtures? ☐ Yes ☐ No ixtures? ☐ Yes ☐ No ixtures? ☐ Yes ☐ No ixtures? ☐ Yes ☐ No ixtures? ☐ Yes ☐ No ixtures? ☐ Yes ☐ No ixtures? ☐ Yes ☐ No ixtures? ☐ Yes ☐ No ixtures? ☐ Yes ☐ No ixtures? ☐ Yes ☐ No ixtures? ☐ Yes ☐ No ixtures? ☐ Yes ☐ No ixtures? ☐ Yes ☐ No ixtures? ☐ Yes ☐ No ixtures? ☐ Yes ☐ No ixtures? ☐ Yes ☐ No ixtures? ☐ Yes ☐ No ixtures? ☐ Yes ☐ No ixtures? ☐ Yes ☐ Yes ☐ No ixtures ☐ Yes ☐	(Initial) Wastewater Flow: Trench Spacing: Soil Cover: (Maximum soil cover shall 36" above the trench bot	<u>S</u> GPD Feet on Center inches not exceed tom)
Facility Type:	△ New □ Expansion □ Repair ixtures? □ Yes ○ No ive: ○ Station (Repair) No WDDDD Station ○ (Repair) (Repair) Number of trenches (Repair) (Repair) feet Trenches shall be installed on contour at a Maximum Trench Depth of: 22.718 inches (Trench bottoms shall be level to +/-1/4" in all directions) GPM	(Initial) Wastewater Flow: Trench Spacing: Soil Cover: (Maximum soil cover shall	<u>Seet on Center</u> Feet on Center inches not exceed tom)
Facility Type: State Basement? Yes No Basement Fi Type of Wastewater System** 252, 1281 (See note below, if applicable []) 25%, 1663 Installation Requirements/Conditions Septic Tank Size 2000 gallons Pump Tank Size gallons Pump Requirements: ft. TDH vs. Conditions:	☐ New ☐ Expansion ☐ Repair ixtures? ☐ Yes ☐ No iv ☐ Z (Repair)	(Initial) Wastewater Flow: Trench Spacing: Soil Cover: (Maximum soil cover shall 36" above the trench bot <u></u> Aggregate Depth:	Seet on Center inches not exceed tom)
Facility Type:	☐ New ☐ Expansion ☐ Repair ixtures? ☐ Yes ☐ No iv ☐ Z (Repair)	(Initial) Wastewater Flow: Trench Spacing: Soil Cover: (Maximum soil cover shall 36" above the trench bot <u></u> Aggregate Depth:	Feet on Center inches not exceed tom)

Owner/Legal Representative Signature:	Date:
This Construction Authorization is subject to revocation if the site plan, plat, or the inte	nded 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:	Date: $9 - 1 - 15^{-1}$ Construction Authorization Expiration Date: $9 - 1 - 20$

28496 HTE# $f \le 5 - 36567$ Harnett County Department of Public Health Permit # ______ Site Sketch ISSUED TO: Chad Clasgow SUBDIVISION SUBDIVISION Date: Date: Date:



BUCKHORN FARASLN.