HTE# 15-5-37283

## Har it County Department of Public lealth

Improvement Permit

28588

	DECEMBER AND DESCRIPTION OF ISSUED WITH ONLY			
ISSUED TO: Rayal DAK'S Burlde	PROPERTY LOCATION:	TUTAK	1615 (2)	107 //
NEW ☐ REPAIR ☐ EXPANSIO	Site Supplies	Improvements require	d arion to Communicate Autori	LOT # <u>18</u>
Type of Structure:	Jile Jile	improvements require	d prior to Construction Authori	zation Issuance:
Proposed Wastewater System Type: 25% (188)	JEW -			
Projected Daily Flow: 486 GPD				
Number of bedrooms: Number of Occupa	ints: 8 max			
Basement Yes No				
Pump Required: □Yes □ No □ May be requir	ed based on final location and elevations	of facilities		
Type of Water Supply:   Community Public	☐ Well Distance from well	feet	Permit valid for:	Five years
Permit conditions:				☐ No expiration
Authorized State Agent::	Date:		CFF 1971	CUED CUED CUEDO
The issuance of this permit by the health Department in no way guarant	es the issuance of other permits. The permit holder	is responsible for checking	the state of the state of	CHED SITE SKETCH
		by a change in ownership	of the site. This permit is subject to co	neeting their requirements. This
the Laws and Rules for Sewage Treatment and Disposal and to conditions	of this permit	, ,	permit to subject to c	omphance with the provisions of
	Construction Author	rization		
	(Required for Building Pe	rmit)		
The construction and installation requirements of Rules .1950, .1952, .195 with the attached system layout.	l, .1955, .1956, .1957, .1958. and .1959 are incorp	orated by references into t	his permit and shall be met. Systems s	hall be installed in accordance
1			The second secon	
ISSUED TO: Royal Oaks 130 ald	CAN'D PROPERTY LOCATI	TION: SA 1440	ATURNE RO	
/	SURDIVISION	ATKTAS	Vellage	107 # / 0
Facility Type: SFD	_ New _ Expansion	Repair	Veringo.	LOT # _/ &
Basement?  Yes No Basement Fixtu		L nepair		
			// :: N W	1.40
(See note below, if applicable	System System		(Initial) Wastewater Flow: _	980 GPD
252021	SUZTZO (Repa	• \		
Installation Requirements/Conditions	Number of trenches 3	air)		
			S	
D T 1.6	Exact length of each trench	feet Tre		eet on Center
	Trenches shall be installed on contour		Cover: inc	thes
	Maximum Trench Depth of: <u>20ー</u> )		Maximum soil cover shall no	t exceed
	Trench bottoms shall be level to +/-1	1/4"	36" above the trench bottor	n)
	n all directions)		10	,
Pump Requirements:ft. TDH vs	GPM		60	inches below pipe
		Agg	gregate Depth: 2	inches above pipe
Conditions:				inches total
			•	menes total
VATER LINES (INCLUDING IRRIGATION) MUST BE	10FT, FROM ANY PART OF SEPTIC	SYSTEM OR REPAI	R AREA	
IO UTILITIES ALLOWED IN INITIAL OR REPAIR DRA	IN FIFI D ARFA	JIJIEM OK KEI AI	N ANLA.	
*If applicable: I understand the system type specified is	different from the type specified on to	the application. I acc	cept the specifications of this	permit.
Owner/Legal Representative Signature:			Date:	
his Construction Authorization is subject to revocation if the site plan, plat,	or the intended use changes. The Construction Author	orization shall not be transf	ferred when there is a change in owner	rship of the site. This
onstruction 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				
uthorized State Agent; Date: 11-6-12-				
uthorized State Agent: Date: Date:				
uthorized State Agent:  Construction Authorization Expiration Date: 11-6-20  Construction Authorization Expiration Date: 11-6-20				

## Harnett County Department of Public Health Site Sketch

PROPERTY LOCATON: SALVY & ATICETS AD

SUBDIVISION ATICETS AD

Authorized State Agent:

Date: 11-6-15

