HTE# 15-5-37414 10

Harnett County Department of Public Health

28637

Improvement Permit

Ą	building p	ermit	cannot	be issue	d with	only		nprovement		51 V X	
			PR	OPERTY	LOCAT	ION:	r	NDGE	001	VAW	

PROPERTY	LOCATION:	WIDO

ISSUED TO: NEAVER DEVELOP	NENT SUBDIVISION	THOMAS	MANOR	LOT # 10
NEW REPAIR 🗆 EXPANSION		Site Improvements req	uired prior to Construction Author	ization Issuance:
Type of Structure: SED (425772)				
Proposed Wastewater System Type: 25% REDU	IGIUN SYSTEM			
Projected Daily Flow: GPD	0			
Number of bedrooms: Number of Occupan	its: <u> </u>			
Basement 🗆 Yes 🖂 No				
	d based on final location and eleva		B 1 117	tre.
Type of Water Supply: Community Public [Well Distance from well	teet	Permit valid for:	Five years
Permit conditions:				No expiration
the a				
Authorized State Agent::	READS Date:	2/2/16	SEE ATT	ACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guarante	<u></u>			
site is subject to revocation if the site plan, plat, or the intended use cha	nges. The Improvement Permit shall not be	affected by a change in owner	rship 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			
	C	a •	and the second sec	
	Construction Au	thorization		
	(Required for Build			
The construction and installation requirements of Rules .1950, .1952, .195 with the attached system layout.	I, .1955, .1956, .1957, .1958. and .1959 a	re incorporated by references i	into this permit and shall be met. Systems	shall be installed in accordance
ISSUED TO: WEAVER PENELOPN	PROPERTY		OCEON WAY	
	SUBDIVISI	ON THOMAS	MANOR	LOT # 10
Facility Type: BFD (42272)	_ New 🗆 Expan			
Basement? Ves No Basement Fixtu		— f		
Type of Wastewater System** 25%	LEDUCTION STS	TEM	(Initial) Wastewater Flow:	360 GPD
(See note below if applicable []) -			(IIIIIII) // asternater //om/	
(See note below, if applicable)	25% RED SYS	(Repair)		
Installation Requirements/Conditions	Number of trenches		-	
Septic Tank Size 1000 gallons	Exact length of each trench \underline{a}	LHO feet	Trench Spacing:	Feet on Center
Pump Tank Size gallons	Trenches shall be installed on c			inches
0	Maximum Trench Depth of:	10	(Maximum soil cover shall i	
	(Trench bottoms shall be level		36" above the trench both	
	in all directions)			

Pump F	lequirements:	ft. TDH vs	GPM	1			inches b	elow pipe
	0	0	0 0		izon APPLICA	Aggregate Depth:		above pipe
Conditio	Ins: PERMIT	BASED ON	A tre	HOSAL VI	ream APPLICA	INTS DO	in	iches total

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: Date:						
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 provision 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: Construction Authorization Expiration Date:	4 7 2)					





