#### HTE# 15-5-37536

## Harnett County Department of Public Health

28624

### **Improvement** Permit

A building permit cannot be issued with		
PROPERTY LOCAT	TION: COUNTRAJSIOE DA.	
	OALMONT	LOT # 52
NEW REPAIR EXPANSION Type of Structure:	Site Improvements required prior to Construction Authorization	Issuance:
Type of Structure:		
Proposed Wastewater System Type: 25% REPUCTION SYSTEM		
Projected Daily Flow: GPD	°	
Number of bedrooms: <u>5</u> Number of Occupants: <u>10</u> max		
Basement 🗆 Yes 🔀 No		
Pump Required: Yes 🛛 No 🛛 May be required based on final location and eleval	tions of facilities	
Type of Water Supply:  Community X Public  Well Distance from well 10	<u>50</u> feet Permit valid for: 📈	Five years
Permit conditions:		No expiration
last de	1	
Authorized State Agent:: Dector Date:	12/9/15 SEE ATTACHED S	SITE SKETCH

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, .1952, .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.

ISSUED TO: MCKEE HOMES	PROPERTY LOCATION:	NTRUSIDE DR
	SUBDIVISION OPALMON	57 LOT # 52
Facility Type: 580 (69'756')	New Expansion Renair	
Basement? 🗆 Yes 🛛 No 🛛 Basement Fix	(tures? 🗆 Yes 📈 No	
Basement?  Yes No Basement Fix Type of Wastewater System**	REDUCTION SYSTEM	(Initial) Wastewater Flow:O O GPD
(See note below, if applicable )	RED. 575, (Repair)	
Installation Requirements/Conditions	Number of trenches	C
Septic Tank Size 12.50 gallons	Exact length of each trench _250_ feet	Trench Spacing: Feet on Center
Pump Tank Size gallons	Trenches shall be installed on contour at a	Soil Cover: 6-38 inches
	Maximum Trench Depth of: <u>18-30</u> inches	(Maximum soil cover shall not exceed
	(Trench bottoms shall be level to +/-1/4"	36" above the trench bottom)
	in all directions)	,
Pump Requirements:ft. TDH vs	GPM	inches below pipe
Conditions: Do wor, REMOVE A	by Soil From DRAIN FIELD	Aggregate Depth: inches above nine

# 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 per	rmit.
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 provisions of the Laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit.	IED SITE SKETCH
Authorized State Agent: Date: 12/1/15 Construction Authorization Expiration Date: 12/1/15	

