HTE# 16-5-37870 Harnett county Department of Public Hearth

28692

Improvement Permit

A building permit cannot be issued with only an Improvement Permit ISSUED TO: Todd Whotherton

SUBDIVISION

REPAIR | EXPANSION |

Type of Structure: 2 Bar 700 | House

Proposed Wastewater System Type: 2526 1251 UCTUS

Projected Daily Flavor. Projected Daily Flow: 240 GPD 2 Number of Occupants: 4 max Number of bedrooms: Basement Yes Pump Required: ☐Yes ☐ No May be required based on final location and elevations of facilities Type of Water Supply: ☐ Community ☐ Public ☐ Well Distance from well ________ feet Five years Permit valid for: Permit conditions: ☐ No expiration Date: 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. Facility Type: ZBM Pool House No Basement Fixtures? Yes No Type of Wastewater System** 25% TONO System (Initial) Wastewater Flow: 240 GPD (See note below, if applicable

) 25 2 Down Sustra (Repair) Installation Requirements/Conditions Septic Tank Size 1000 gallons Pump Tank Size _____ gallons Maximum Trench Depth of: 24-518 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 SEE ATTACHED SITE SKETCH 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. an E Manhanton 22 Date: 2-16-16

Construction Authorization Expiration Date: Z-16-21 Authorized State Agent:

HTE#	16-	5-	33870	

Harnett County Department of Public Health Site Sketch

	PROPERTY LOCATON: SOL 1802 CANE 12	D
ISSUED TO: Toda Whotevfor	SUBDIVISION TANNENS Rodge	LOT # _7
Authorized State Agent: James & J	Manhanter Zens Date: 2-	6-16

