HTE# <u>16-5-38513</u> R Harn	ett County Dep	artment of Pub	lic Health	28884
	Improve	<u>ment Permit</u>		
٨		sued with only an Improvement	Pormit	
A	Dunung permit cannot be is.	TY LOCATION: Sr 120	De Comieros	
ISSUED TO: MITHON ISUTIENPA	ise Encourder	ISION LIADET	Dorat	LOT # 12
NEW DY REPAIR D EXPANSIO		Gite Improvements re	quired prior to Construction Autho	
Type of Structure:		site improvements re	quireu prior to construction Autilo	fization issuance.
Proposed Wastewater System Type: 252.D	AD175TO			
Projected Daily Flow: GPD	21100 La Di			
Number of bedrooms: Number of Occu	pants:	· · · · · · · · · · · · · · · · · · ·		
Basement \Box Yes \Box No				
	ired based on final location a	nd elevations of facilities	the state maintaine	
Type of Water Supply: Community Public			Permit valid for:	Five years
Permit conditions:	- Wen Distance nom		renne vang for.	No expiration
A	1			
Authorized State Agent 2 M	15	Date: 6-14-	LG SEE AT	TACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guara				
site is subject to revocation if the site plan, plat, or the intended use				
the Laws and Rules for Sewage Treatment and Disposal and to condition	ns of this permit	, ,		
	Constructio	n Authorization		
	2000 1000 1000 1000 1000 1000 1000 1000	Trade Mark 242 (Tradition Markets)		
	cardenas caranteros presenteros de caracteros antenas de	or Building Permit)		NU / NOV 10 10 10 10 10 10
The construction and installation requirements of Rules .1950, .1952, .1	954, .1955, .1956, .1957, .1958. and	d .1959 are incorporated by references	into this permit and shall be met. System	ns shall be installed in accordance
with the attached system layout.				
ISSUED TO: <u>MELton Entryprise</u> Facility Type: <u>SFD</u>	INL PR	OPERTY LOCATION: 50 /3	30) Lone aD	
		RDIVISION 1224FDG	Trat	LOT # 12_
Facility Type: SFD		Expansion Repair		
Basement? Ves No Basement Fix	tures? I Yes I No	Expansion in Repair		
			// N. W	21 0 000
Type of Wastewater System** 25% 5%	Wurn Dy	5MA-	(Initial) Wastewater Flow:	<u></u>
(See note below, if applicable □)	10 -			
232014	source	(Repair)		
Installation Requirements/Conditions	Number of trenches		6	
Septic Tank Size <u>10000</u> gallons	Exact length of each tre	nch 160 feet	Trench Spacing:	_ Feet on Center
Pump Tank Size gallons	Trenches shall be installe		Soil Cover:	inches
8		of: <u>24</u> inches		
	(Trench bottoms shall be		36" above the trench bo	
	1		JU ADOVE LIE LIENCII DU	ttomy
D D (TD)	in all directions)		1.	
Pump Requirements:ft. TDH vs	GPM		Aggregate Depth:	inches below pipe
			Aggregate Depth:	inches above pipe
Conditions:				inches total
WATER LINES (INCLUDING IRRIGATION) MUST	RE TOFT FROM ANY PAR	T OF SEPTIC SYSTEM OR	REPAIR AREA	
		I OI JLI IIC JIJILM OK	NLI AIN ANLA.	
NO UTILITIES ALLOWED IN INITIAL OR REPAIR I	JKAIN FIELD AKEA.			
**If applicable: / understand the system type specified	d is different from the type	specified on the application	n. I accept the specifications of	this permit.
		,	7	r
Owner/Legal Representative Signature:			Date	
Owner/Legal Representative Signature: This Construction Authorization is subject to revocation if the site plan,	plat or the intended use there T	he Construction Authorization shall	be transformed when there is a share is	ownership of the site. This
				ATTACHED SITE SKETCH
Construction Authorization is subject to compliance with the provisions of	of the Laws and Kules for Sewage Tre	aument and Disposal and to the condi	aons of this permit. SEE	ATTACILU SILE SKETCH

Authorized State Agent:	5 N	Anhonte	Date:	6-14-16
		Construction Authorization	Expiration Date:	(-K1-1/

Permit # _ 28884 HTE# 16-5-385132 Harnett County Department of Public Health Site Sketch ISSUED TO: MIHON ENTERPRISES TWC SUBDIVISION WAS EPOPLAT LOT # 12 ab JE NONS 6-14-16 too Date: _ Authorized State Agent: 25% R KEP Þ 10' Cardeogo Buffe 9 55 5 7 55 G 181 481 55 1) Compass LANCE