HTE# 16-5-38513

## Harnett County Department of Public Health

28800

**Improvement Permit** 

A building permit cannot be issued with only an Improvement Permit	
ISSUED TO: MILTON ENTERS WESES SUBDIVISION WASE POINTE LOT	# 12
NEW REPAIR Fig. EXPANSION Site Improvements required prior to Construction Authorization Issuance	
Type of Structure: SEO (SH'×50')	
Proposed Wastewater System Type: 25% REDUCTION SYSTEM	
Projected Daily Flow: 360 GPD	
Number of bedrooms: 3 Number of Occupants: 6 max	
Basement □Yes No □ May be required based on final location and elevations of facilities	
Type of Water Supply:   Community Public   Well Distance from well   Permit valid for: Five y Permit conditions:	
le son	
Authorized State Agent::  REHS Date: 5 12 L6 SEE ATTACHED SITE SI	(FTCI)
Authorized State Agent::  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 resiste 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 Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.	quirements. This
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 with the attached system layout.	in accordance
ISSUED TO: MILTON ENTERPRISES PROPERTY LOCATION: COMPASS LANDINE SUBDIVISION WADE POINTE LOT #	
Facility Type: <u>SFOG4~56</u> New □ Expansion □ Repair	# 12
Basement?  Yes  No Basement Eixtures?  Yes  No	
Type of Wastewater System** 25%, REDUCTION SYSTEM (Initial) Wastewater Flow: 360	GPD
(See note below, if applicable ) 25% RED. SYSTEM (Repair)	
Installation Requirements/Conditions Number of trenches 3	
Septic Tank Size 1000 gallons Exact length of each trench 100 feet Trench Spacing: Feet on Cer	iter
Pump Tank Size gallons Trenches shall be installed on contour at a Soil Cover: 6-12 inches	
Maximum Trench Depth of: 18-23 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 GPMinches	below pipe
Aggregate Depth: inche	s above pipe inches total
conditions.	miches 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 plan.	
Inis 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 si	te. 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.	IL SKEICH
Authorized State Agent: Date: 5 12 16	
Construction Authorization Expiration Date: 5 1/2 2	

## Harnett County Department of Public Health Site Sketch

