HTE# 16-5-38603

## Harnett County Department of Public Health

28729

Improvement Permit

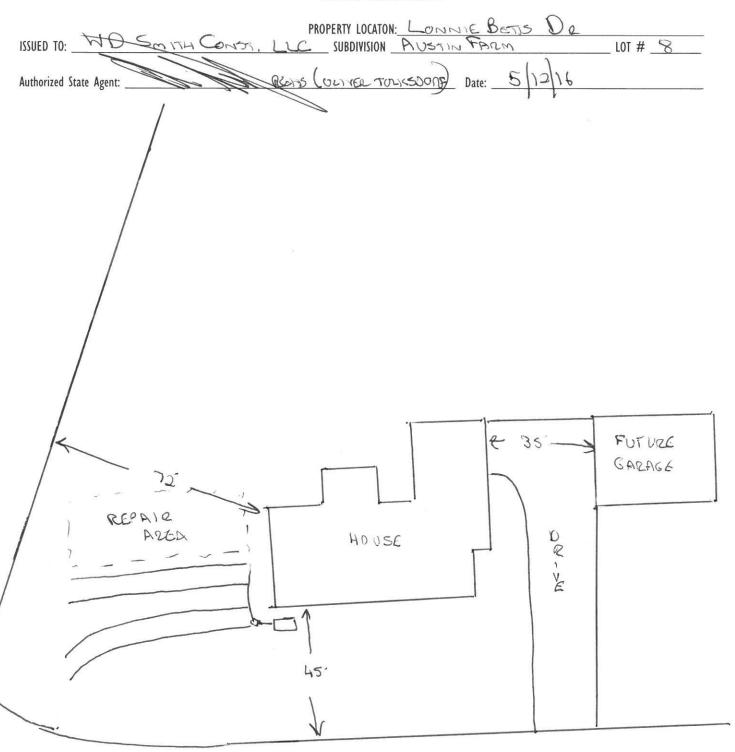
A building permit cannot be issued with only an Improvement Permit
PROPERTY LOCATION: LONNE DETIS De.
ISSUED TO: WO Smith Constr. LC SUBDIVISION RUSTIN FROM LOT # 8  NEW REPAIR   EXPANSION   Site Improvements required prior to Construction Authorization Issuance:
Proposed Wastewater System Type: 25% REDUCTION SYSTEM
Projected Daily Flow: GPD
Number of bedrooms: Number of Occupants: max
Basement 🗆 Yes 🔀 No
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 100 feet Permit valid for: Five years Permit conditions:  No expiration
Authorized State Agent:  Date: 5 12 6  SEE ATTACHED SITE SKETCH
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 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: SEO (74760)  New   ROPERTY LOCATION: LONG BOTIS De SUBDIVISION RUSTIN FORM LOT#8
SUBDIVISION AUSTIN FORM LOT # 8
Facility Type: SRO 199 ABO)   New   Expansion   Repair
Recoment? Vac No Recoment Firetures? Vac No
Type of Wastewater System** Q5% RGOUCTION SYSTEM (Initial) Wastewater Flow: 360 GPD
(See note below, if applicable 🗆)
25% REO. SYSTEM (Repair)
Installation Requirements/Conditions Number of trenches
Septic Tank Size 1000 gallons Exact length of each trench 50 feet Trench Spacing: 9 Feet on Center
Pump Tank Size gallons
Maximum Trench Depth of: 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
Aggregate Depth: inches above pipe
Conditions: inches 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:
Authorized State Agent:  Date: 5 12 16  Construction Authorization Expiration Date: 3 12 20
Construction Authorization Evaluation Date: 2 17212

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## Harnett County Department of Public Health Site Sketch



Department of Environment, Health and Natural Resources Division of Environmental Health On-Site Wastewater Section Sheet: Property ID: Lot #: File #: Code:

## SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

Location Water S Evaluation		: Auge	Date I Design Prope Public In	Evaluated: n Flow (.1949): 36 rty Recorded: idividual	Cut Spring	ze:	er		8 ,
P R O F I L E	.1940 Landscape Position/ Slope %	Horizon Depth (In.)	SOIL MORPHOLOGY .1941		OTHER PROFILE FACTORS				
			.1941 Structure/ Texture	.1941 Consistence Mineralogy	.1942 Soil Wetness/ Color	.1943 Soil Depth (IN.)	.1956 Sapro Class	.1944 Restr Horiz	Profile Class & LTAR
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Description	Initial System	Repair System	Other Factors (.1946): Site Classification (.1948):
Available Space (.1945)	1	7	Evaluated By:
System Type(s)	15%	200	Others Present:
Site LTAR	,5	. 3	