HTE#/6-5-38797

## Harnett County Department of Public Health

28877

**Improvement Permit** 

A building permit cann	ot be issued with only an Improvement F	Permit /				
ISSUED TO: Confort Homes INC	PROPERTY LOCATION SIC 1441	Chalybeate Sp	NINGORD			
1330120 10.	JODDINIJION CALOS S COL		LOI //			
NEW ☑ REPAIR ☐ EXPANSION ☐  Type of Structure: ☑ ⋝ ► ► ►	site improvements requ	ired prior to Construction Authoriza	tion issuance:			
Proposed Wastewater System Type: 2500725000000	-					
Projected Daily Flow: 360 GPD						
3 11 1	max					
Basement □Yes ☑ No						
Pump Required: ☐Yes ☐ No ☐ May be required based on final lo			=1			
Type of Water Supply:  Community  Public  Well Distant	ce from well feet	Permit valid for:	<ul><li>☑ Five years</li><li>☐ No expiration</li></ul>			
Authorized State Agent: 2 Manhand	Date: 6-7-10	/ CEE ATTAC	HED SITE SKETCH			
The issuance of this permit by the Health Department in no way guarantees the issuance of other						
site is subject to revocation if the site plan, plat, or the intended use changes. The Improvement						
the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.						
Constr	uction Authorization					
(Reg	uired for Building Permit)					
The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .1957,	.1958. and .1959 are incorporated by references in	to this permit and shall be met. Systems sh	all be installed in accordance			
with the attached system layout.						
ISSUED TO: Comfort Homes INC	PROPERTY LOCATION: 5-146	41 Chalyberte	Spring?			
1	SUBDIVISION _ Cross LA	~/x	LOT # 50			
Facility Type: SFD V New	Expansion Repair					
Basement? ☐ Yes ☑ No Basement Fixtures? ☐ Yes	☑ No					
Type of Wastewater System** 25% Return of Was	ystra	(Initial) Wastewater Flow:	360 GPD			
(See note below if applicable (1)	/					
LPP/P-ptv 25	2-3 / (Repair)					
Installation Requirements/Conditions Number of trend	nes	<b>A</b>				
Septic Tank Size 1000 gallons Exact length of e	each trench 150 feet	Trench Spacing: F	eet on Center			
	installed on contour at a	Soil Cover: inc	:hes			
Maximum Trench	Depth of: 20つ18 inches	(Maximum soil cover shall no	t exceed			
(Trench bottoms	shall be level to +/-1/4"	36" above the trench bottor	n)			
in all directions)						
Pump Requirements:ft. TDH vs GPM			inches below pipe			
		Aggregate Depth: 2	inches above pipe			
Conditions:			inches total			
WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM A	NY PART OF SEPTIC SYSTEM OR RI	EPAIR AREA.				
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD AREA						
1.44.						
**If applicable: I understand the system type specified is different from	the type specified on the application.	I accept the specifications of thi	s permit.			
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	changes. The Construction Authorization shall not be	transferred when there is a change in own	ership of the site. This			
Construction Authorization is subject to compliance with the provisions of the Laws and Rules for			TACHED SITE SKETCH			
٠.١ ،	1.0					
Authorized State Agent: Date: 6-7-16						
Authorized State Agent: Date: 6-7-16  Construction Authorization Expiration Date: 6-7-21						

HTE#	16	5	-38	7	97	)
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## Harnett County Department of Public Health Site Sketch

PROPERTY LOCATON: STUTY 41 Charyheater
SUBDIVISION Cross work Authorized State Agent CRUSS LENK DR