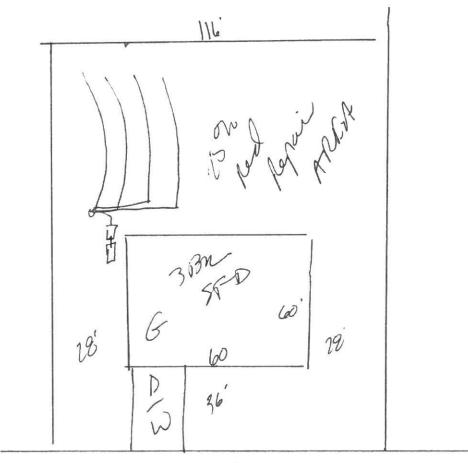
HTE# 16-5-38970K Har	nett County Department of Public Health	28890
	Improvement Permit	
	A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: SCI 429 Chalypeartes M	^
ISSUED TO: WUNN CONSTRuction In	K SUBDIVISION Wars Ford	LOT # 2
	SION Site Improvements required prior to Construction Auth	
Type of Structure: SFID		
Proposed Wastewater System Type: 25% DCDA	Word	
Projected Daily Flow: GPD 48		
Number of bedrooms: Number of Occ Basement Yes No	cupants:max	
	quired based on final location and elevations of facilities	
	Well Distance from well feet Permit valid for:	Five years
Permit conditions:		No expiration
	1, Aspars	
Authorized State Agent 2 M	ANANS Date: 6-25-14 7-18-16 SEE A	ATTACHED SITE SKETCH
The issuance of this permit by the Health Department in no way gua	arantees 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 us the Laws and Rules for Sewage Treatment and Disposal and to condit	e changes. The Improvement Permit shall not be affected by a change in ownership of the site. This permit is subject tions of this permit.	to compliance with the provisions of
	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.		
wants to fill a franchis	THE DEODEDTY LOCATION. SA 1479 CL -1.	4 10
ISSUED TO: WHAN CONSTRUCTION	PROPERTY LOCATION: <u>Se 1423</u> Cholupse SUBDIVISION <u>Avery</u> ord New Expansion Repair	LOT # Z
Facility Type: SFD	V New Transion Renair	
	ixtures? 🗆 Yes 🕞 No	480
	ducto Systa (Initial) Wastewater Flow	: 365 GPD
(San note below if applicable )		
25316	elucture Syst (Repair)	
Installation Requirements/Conditions	Number of trenches	
Septic Tank Size 1000 gallons	Exact length of each trench <u>20</u> feet Trench Spacing:	
Pump Tank Size gallons	Trenches shall be installed on contour at a Soil Cover:	_ inches
	Maximum Trench Depth of: <u>24</u> inches (Maximum soil cover shal	
	(Trench bottoms shall be level to +/-1/4" 36" above the trench b	ottom)
Pump Requirements:ft. TDH vs	in all directions)	> inches below pipe
	GPM Aggregate Depth:	Z inches above pipe
Conditions:	186.68att Deptit.	$\frac{2}{2}$ inches above pipe
WATER LINES (INCLUDING IRRIGATION) MUST	T BE 10FT. FROM ANY PART OF SEPTIC SYSTEM OR REPAIR AREA.	
NO UTILITIES ALLOWED IN INITIAL OR REPAIR		
		( dia mania
<u>* If applicable:</u> I understand the system type specific	fied is different from the type specified on the application. I accept the specifications o	this permit.
Owner/Legal Representative Signature	Date	
This Construction Authorization is subject to revocation if the site pla	n, plat, or the intended use changes. The Construction Authorization shall not be transferred when there is a change i	n ownership of the site. This
		E ATTACHED SITE SKETCH
Authorized State Agent: Marding Date: Date: Date: Date: 7-18-16 Construction Authorization Expiration Date: Construction Authorization Expiration Date:		
Construction Authorization Expiration Date: 6-25-27 7-18-21		

HTE# 16.5-38970 R Harnett County Department of Public Health Site Sketch PROPERTY LOCATON DE 1429 Chalyheat. RD ISSUED TO: Lynn Construction Inz SUBDIVISION Avery Port LOT # Z Authorized State Agent: \_\_\_\_\_\_ Montan from the Rosets Date: \_\_\_\_\_\_ &-ZS-11



Avery Pond RD