HTE#16-5-39050

Harnett County Department of Public Health

28955

Improvement Permit

A building permit cam	PROPERTY LOCAL	TION: Sor 1425 (Chalyheate N.)
ISSUED TO: Winn Constanction		AvenyPor		LOT # 18
NEW REPAIR EXPANSION	_ 300011131011		uired prior to Construction Author	
Type of Structure:		site improvements req	and provide constitution reason	
Proposed Wastewater System Type: 25% Newstran			3000	
Projected Daily Flow: 480 GPD				
Number of Decupants: 8	max			- Sec. 481
Basement □Yes ☑ No				
Pump Required: □Yes □ No □ May be required based on final I	location and eleva	tions of facilities		/
Type of Water Supply: Community Public Well Distar			Permit valid for:	Five years
Permit conditions:				☐ No expiration
	TRACE			
Authorized State Agent: Janes (Awhon)	Date: _	7-19-16	SEE AT	TTACHED 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	Permit shall not be	affected by a change in owne	rship of the site. This permit is subject t	o compliance with the provisions of
the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.				
Constr	<u>ruction Au</u>	<u>thorization</u>		
(Re	quired for Build	ing Permit)		
The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .1957	, .1958. and .1959 a	re incorporated by references	into this permit and shall be met. Syster	ns shall be installed in accordance
with the attached system layout.				
ISSUED TO: Wynd Comstauction	DDODEDTY	LOCATION: 247	7 Chaliparto!	en
1330ED TO. OGNA COMATICO TIM		ON Aven		LOT # 18
< 5	/		g corex	LUI # 18
Facility Type: New	Expans	sion \square Repair/		
Basement? Yes No Basement Fixtures? Yes	□Z No		an entrar out	1100
Type of Wastewater System** 25% REDU 5760 S	yStBn		(Initial) Wastewater Flow:	: <u>480</u> GPD
(See note below, if applicable □) 25% 76th uran	,			
25 % 140DULTEN	S48 48	(Repair)		
Installation Requirements/Conditions Number of trend	ches 4		9	
Septic Tank Size 1200 gallons Exact length of	each trench	100 feet	Trench Spacing:	_ Feet on Center
Pump Tank Size gallons Trenches shall b			Soil Cover:	inches
Maximum Trencl	h Denth of	ZO " inches	(Maximum soil cover shall	not exceed
(Trench bottoms	shall he level	n +/-1/4"	36" above the trench bo	
in all directions		.0 .7-17-1	30 above the trenen be	recomp
	,		4	inches helew nine
Pump Requirements:ft. TDH vs GPM				inches below pipe
			Aggregate Depth:	inches above pipe
Conditions:				12 inches total
WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM A	ANY PART OF S	EPTIC SYSTEM OR I	REPAIR AREA.	
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD ARE				
**If applicable: I understand the system type specified is different from	the type specifi	ed on the application	. I accept the specifications of	f 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 Constru	ction Authorization shall not		
Construction Authorization is subject to compliance with the provisions of the Laws and Rules for	Sewage Treatment ar	d Disposal and to the conditi	ons of this permit.	E ATTACHED SITE SKETCH
21.	toan	4	710 1	2000 - 21 80 25 20 2
Authorized State Agent: Authorized State Agent:	the 14	Date:	1-12-16	
	truction Author	rization Expiration D	1-12-16 Date: 7-18-2	/
COII3	delion mullion			

Harnett County Department of Public Health Site Sketch

				PROPERTY LOCATON	: SN1425	Chal	Leate R	5	
ISSUED TO:	Wynn	Construction	-		Aveny			_ LOT # _	18
Authorized Stat	e Agent:	Janes ?	10	anhant	EIRHS'	Date:	7-19-16	,	

