HTE# 16-5-39119	R	Harı
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HTE# <u>16-5-39119</u> R Harr	nett County Department of Pub	lic Health 29400		
ISSUED TO: WAtermank Homes NEW I REPAIR EXPANSION Type of Structure: SFD		Rollin ND		
		Permit valid for: M Five years No expiration		
Authorized State agent: The issuance of this permit by the Haelth Department in no way guara site is subject to revocation if the site plan, plat, or the intended use the Laws and Rules for Sewage Treatment and Disposal and to conditio	changes. The Improvement Permit shall not be affected by a change in own	ecking with appropriate governing bodies in meeting their requirements. This ership of the site. This permit is subject to compliance with the provisions of		
Construction Authorization ( <u>Required for Building Permit</u> ) The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1958, .1959 are incorporated by references into this permit and shall be met. Systems shall be installed in accordance				
Facility Type: 5FD	SUBDIVISION Repair	Beseve LOT # /		
/ //	ctures? I Yes No Derebustysta	(Initial) Wastewater Flow: <u>360</u> GPD		
Installation Requirements/Conditions Septic Tank Size / OOO gallons Pump Tank Size gallons	Trenches shall be installed on contour at a Maximum Trench Depth of: inches			
Pump Requirements:ft. TDH vs		Aggregate Depth: inches below pipe inches above pipe 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: / understand the system type specified is different from the type specified on the application. / accept the specifications of this permit.				
<u>"It applicable:</u> I understand the system type specified	d 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. 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.	
Authorized State Agent: Monhafe Date:	6-17

Permit # 29400 HTE# 16-5-39119R Harnett County Department of Public Health Site Sketch ISSUED TO: WAtermank Hors INC SUBDIVISION The Reserve LOT # \_\_\_\_ Authorized State Agent: Jan E Marchandre RBars 7-6-17 Date: \_\_\_\_\_ 15h Nod Nepair Sneet Butter 5130 61 3pm 50 TS P Reserve Dr