HTE# 16-5-39530

## Harnett County Department of Public Health

29012

Improvement Permit

	PROPERTY LOCATION: Cummines Ro
ISSUED TO: ROSEN: MARY JO GURVLE	SUBDIVISION LOT #
NEW REPAIR ☐ EXPANSION ☐	Site Improvements required prior to Construction Authorization Issuance:
Type of Structure: SFO (60' x80)	
Proposed Wastewater System Type: Conventional	_
Projected Daily Flow: 480 GPD	
Number of bedrooms: Number of Occupants:	_max
Basement  Yes  No	
Pump Required: ☐Yes ☐No ☐ May be required based on final le	
Type of Water Supply:   Community Public   Well Distant	nce from well LOO feet Permit valid for: Five years
Permit conditions:	No expiration
The little of the same of the	
Authorized State Agent::	Date: Date: SEE ATTACHED 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.	r permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This Permit shall not be affected by a change in ownership of the site. This permit is subject to compliance with the provisions of
Constr	uction Authorization
	quired for Building Permit)
with the attached system layout.	.1958. and .1959 are incorporated by references into this permit and shall be met. Systems shall be installed in accordance
ISSUED TO: ROBERT & MARY JO GURVE	PROPERTY LOCATION: Cummings Po
Facility Type: 580 (60×80) New	SUBDIVISION LOT #
	☐ Expansion ☐ Repair
Basement?  Yes No Basement Fixtures?  Yes	
AND THE PARTY AN	(Initial) Wastewater Flow: 480 GPD
(See note below, if applicable $\square$ )	
CONVENTIONAL	(Repair)
Installation Requirements/Conditions Number of trencl	hes 1
Septic Tank Size 1000 gallons Exact length of e	each trench <u>533</u> feet Trench Spacing: 9 Feet on Center
Pump Tank Size gallons Trenches shall be	e installed on contour at a Soil Cover: 24-6 inches
	Depth of: 36 - 14 inches (Maximum soil cover shall not exceed
	shall be level to +/-1/4"  36" above the trench bottom)
in all directions)	30 above the trench bottom
Pump Requirements:ft. TDH vs GPM	to the first of the second
amp requirementstt. 1DH vs GFH	inches below pipe
Conditions (See	Aggregate Depth: inches above pipe
Conditions:	inches total
NATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM AI NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD AREA	
	the type specified on the application. I accept the specifications of this permit.
Owner/Legal Representative Signature:	Date:
	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 S	
	O SEE MINUTED SILE SKEICH
Authorized State Agent:	Date: 9/7/16
Constr	ruction Authorization Expiration Date: 97 (2)

## Harnett County Department of Public Health Site Sketch

