HTE# 16-5-39942

Harnett County Department of Public Health

29113

Improvement Permit

A Dui	olding permit cannot be issued with	only an Improvement			
ISSUED TO: WELLS DESIGN BU	VICE CHENT LOCATION C		LANTATION	LOT # 38	
NEW REPAIR - EXPANSION			quired prior to Construction Autho		
Type of Structure: SFD (58~56)			quita prior to constitution riutilo	The control of the co	
Proposed Wastewater System Type: 25% DEOUC	5104 SY35EM				
Projected Daily Flow: 360 GPD					
Number of bedrooms: 3 Number of Occupants	s: <u>C</u> max				
Basement Yes No					
Pump Required: ☐Yes ☐ No May be required Type of Water Supply: ☐ Community Public ☐	based on final location and elevation	ons of facilities	Dannik walid Can	Vr:	
Permit conditions:	Well Distance Holli Well	leet	Permit valid for:	Five years No expiration	
Authorized State Agent::	REHS Date:	21/0/12	CEE AT	TACHED SITE SKETCH	
The issuance of this permit by the Health Department in no way guarantees	the issuance of other permits. The permit he	older is responsible for che	ecking with appropriate governing bodies in	n meeting their requirements. This	
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 ownership of the site. This permit is subject to compliance with the provisions of					
the Laws and Rules for Sewage Treatment and Disposal and to conditions of	this permit				
	Construction Aut	narization		2001 100 100 100 100 100 100 100 100 100	
<u>Construction Authorization</u>					
The construction and installation requirements of Pulses 1950, 1953, 1954	(Required for Building		5.05.5.11.01	F. W. C W. C	
The construction and installation requirements of Rules .1950, .1952, .1954, with the attached system layout.				s shall be installed in accordance	
ISSUED TO: WELLS DESIGN BU	PROPERTY L	OCATION: _C_L	-greve Ro		
Facility Type: SGO(SG > SG)	SUBDIVISION		PLANTATION	LOT # <u>38</u>	
Basement? Yes No Basement Fixture	s? 🗆 Yes 💢 No	= 2			
· ·	LEDUCTION ST	32.EW	(Initial) Wastewater Flow:	_360GPD	
(See note below, if applicable □)	RED. Sys.				
		(Kepair)			
	umber of trenches		9		
	xact length of each trench		Trench Spacing:	Feet on Center	
	renches shall be installed on con-			inches	
	aximum Trench Depth of:	1010000000	(Maximum soil cover shall		
,	french bottoms shall be level to	+/-1/4	36" above the trench bot	tom)	
Pump Requirements:ft. TDH vsG	all directions)				
rump requirementsnt. 1DH vs0	IFN			inches below pipe	
Conditions			Aggregate Depth:		
Conditions:			PERSONAL PROPERTY OF THE PROPE	inches total	
WATER LINES /INCLUDING IRRIGATION) MUST BE 1	OET EDOM ANY DADT OF CER	TIC CVCTEM OD D	TOAID ADEA		
WATER LINES (INCLUDING IRRIGATION) MUST BE 1 NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAI	UFI. FRUM ANT PART UF SEP	TIC 2121EM OK K	EPAIK AKEA.		
**If applicable: I understand the system type specified 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, of	or the intended use changes. The Construction	n Authorization shall not b	e transferred when there is a change in o		
Construction Authorization is subject to compliance with the provisions of the	Laws and Rules for Sewage Treatment and D	isposal and to the condition	ons of this permit. SEE	ATTACHED SITE SKETCH	
Authorized State Agents	REAS	Δ.	Wholis		
Authorized State Agent:	Construction Authoriza	Date: _	11)10 16		
	CONSTRUCTION AUTHORITS	HIUH EXDICATION 1):	are: WIJUION	l l	

Harnett County Department of Public Health Site Sketch

PROPERTY LOCATON: CLARK RD	
ISSUED TO: WELLS RESIGN BUILD SUBDIVISION CURRIN PLANTATION	LOT # <u>38</u>
Authorized State Agent: REAS OLIVER TOLKSDORD Date: 11 10 16	
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