Harnett County Department of Public Health HTE#_16-5-40135 29271 Improvement Permit A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: Rowland Or. (ISSUED TO: Edwart Averett SUBDIVISION NEW 2 Aver, Pand REPAIR EXPANSION Site Improvements required prior to Construction Authorization Issuance: Type of Structure: 4BR SIED Proposed Wastewater System Type: 25% Reduction System (Rump) Projected Daily Flow: 480 GPD Number of bedrooms: 4 Number of Occupants: ____ 8 Basement Yes No Pump Required: \square No \square May be required based on final location and elevations of facilities Type of Water Supply: Community Public Well Distance from well feet Permit valid for: Five years □ No expiration 202 ACGHS Authorized State Agent .: The issuance of this permit by the dealth Department in no way guarantees 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 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 Construction Authorization 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 ISSUED TO: E2ward Averett PROPERTY LOCATION: Rowland Dr. (Chalybeak Springs SUBDIVISION Avery Pond LOT # _____ Facility Type: 4BR SFD New Expansion Repair Basement Fixtures? 🗌 Yes 🛛 No Type of Wastewater System** 25% Reduction System (Pumped) (Initial) Wastewater Flow: 480 (See note below, if applicable []) GPD <u>50% PPBPS 5ystem (Repair)</u> (Repair) ons Number of trenches 4 Installation Requirements/Conditions Septic Tank Size 1000 - 1260 gallons Exact length of each trench 100 feet Pump Tank Size 1000 - 1250 gallons Trench Spacing: 9 Feet on Center Trenches shall be installed on contour at a Soil Cover: 14 - 6 Maximum Trench Depth of: <u>26 - 18</u> inches inches (Maximum soil cover shall not exceed (Trench bottoms shall be level to +/-1/4" 36" above the trench bottom) in all directions) Pump Requirements: _____ft. TDH vs. _____ GPM Conditions: System layed off contour from deep (26in) to shallow (18in) with equal and level distribution accross 335 fem ____ inches below pipe Aggregate Depth: _____ 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: 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: 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. SEE ATTACHED SITE SKETCH

Authorized State Agent: N	121. Lerrans	
Thomas in	Date: _	12-20-66
Tintar Counters-E.	Construction Authorization Expiration Da	ite: 12-20-21

