HTE# 16-5-4-0317 R

## Hariat County Department of Public allth

29127

Improvement Permit

A duilding permit cannot be issued with only an improvement Permit	
ISSUED TO: M LEAN CONTRACTING & TUVEST SUBDIVISION	OCATION: MNGEN KD
DOUGH IN: I TO TO THE TOWN OF THE PARTY OF T	
NEW REPAIR SED (53×50)  Type of Structure:	Site Improvements required prior to Construction Authorization Issuance:
Provid Westwards State I and December 2012	
Proposed Wastewater System Type: Punge o 25% Projected Daily Flow: 360 MGPD	
Projected Daily Flow: See the GPD	
Number of Dedrooms: Number of Occupants: max	
Basement Yes No	A
Pump Required: No May be required based on final location and e Type of Water Supply: Community Public Well Distance from well	
Permit conditions:	2 Proposition 1 Proposition (Continue Operation Continue Operation Con
Fernit Conditions.	No expiration
Mal M	
Authorized State Agent:: Date	E 12/14/)6 SEE ATTACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guarantees the issuance of the permits. The pe	) I TO THE REPORT OF THE PARTY
site is subject to revocation if the site plan, plat, or the intended use changes. The Improvement Permit shall not	
the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.	acus Multo
	Mary Tuli
Construction A	Authorization
	[46,007000]
The construction and installation requirements of Rules 1950, 1952, 1954, 1955, 1954, 1957, 1959, and 195	<del></del>
The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .1957, .1958. and .195 with the attached system layout.	of are incorporated by references into this permit and shall be met. Systems shall be installed in accordance
ACCURACY ACCURACY CONTRACT CON	- n
ISSUED TO: MCLEAN CONTRACTING PROPE	RTY LOCATION: 1, NGEN RD
KIIRDIN	VISION MARKETPLACE LOT # 3
Facility Type: SED (53 ×50) New Exp	pansion   Repair
Basement?  Yes No Basement Fixtures? Yes No	L10
Type of Wastewater System** Pump To 25% REDUCS	GON STEM (Initial) Wastewater Flow: 360. GPD
(See note below, if applicable $\square$ )	(initial) Wastewater Flow GID
	(Repair)
	(Repair)
	75, a
Septic Tank Size 1000 gallons Exact length of each trench	
Pump Tank Size gallons	
Maximum Trench Depth of: _	
(Trench bottoms shall be leve	el to +/-1/4" 36" above the trench bottom)
in all directions)	
Pump Requirements:ft. TDH vs GPM	inches below pipe
	Aggregate Depth: inches above pipe
Conditions:	
WATER LINES (INCLUDING IRRIGATION) MUST BE LOST FROM ANY PART OF	C CENTIC CVCTEN ON DEDAID ADEA
WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM ANY PART OF	F SEPTIC SYSTEM OK REPAIK 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	ocified on the application. Laccent the specifications of this permit
	emed on the appreciation. I accept the specifications of this perimit.
Owner/Legal Representative Signature:	Datas
	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 provision of the Laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit.  SEE ATTACHED SITE SKETCH	
construction Authorization is subject to compliance with the proxisions in the Laws and knies for sewage Treatment and Disposal and to the conditions of this permit.	
Miles Ill	1-1-1-1
Authorized State Agent: REHS	Date: 12 34 ) 6
Construction Authorization Expiration Date: 12 14 2	

## Harnett County Department of Public Health Site Sketch

