HTE# 17-5-4009 Harnett County Department of Public Health

<u>Improvement Permit</u>

		PROPERTY LOCATION: HOLOGO GA	TON RO (SR 1291)
ISSUED TO: HUFOLD Con	neron	SUBDIVISION	101 #
	EXPANSION		ired prior to Construction Authorization Issuance:
	=1>		Part of State of Stat
Proposed Wastewater System Type: 25%	Reduction Syste	~	
Projected Daily Flow: 366 GPI			
	of Occupants: 6	_max	
Basement Yes No			
Pump Required: ☐Yes ☐ No ☑ May	be required based on final	ocation and elevations of facilities	
Type of Water Supply: Community		nce from well 100 feet	Permit valid for:
Permit conditions:	(EXISTING)	☐ No expiration
	(C)	10010-1	CEE ATTACHED SITE SVETCH
Authorized State Agent::	- 4	Date: 4 9 1	SEE ATTACHED SITE SKETCH ting with appropriate governing bodies in meeting their requirements. This
	tended use changes. The Improvemen		hip of the site. This permit is subject to compliance with the provisions o
	Const	ruction Authorization	
		quired for Building Permit)	
The construction and installation requirements of Rules .195			nto this permit and shall be met. Systems shall be installed in accordance
with the attached system layout.			
ISSUED TO: Harold Com	00330	PROPERTY LOCATION: 1200	anyton Rd. (SQ. 1291)
1330ED 10.		CURDIVICION	rington Rd. (SR 1291)
Facility Type: 3872 SFD	New	☐ Expansion ☐ Repair	cor #
	ment Fixtures? Yes		
			(Initial) Wastewater Flow: \$860 GPD
	12 THEOUGH	ON SYSTEM	(Initial) Wastewater Flow:GPD
(See note below, if applicable)	0 \	(-1 - (0 - :)	
	reduction	593+EM (Kepair)	
Installation Requirements/Conditions		cties3	9
Septic Tank Size _/oco_ gallons		each trench 100 feet	Trench Spacing: ———— Feet on Center
Pump Tank Size gallons		e installed on contour at a	Soil Cover: 6 + inches
	Maximum Trenc	h Depth of: 24 inches	(Maximum soil cover shall not exceed
	(Trench bottom:	shall be level to +/-1/4"	36" above the trench bottom)
	in all directions)	
Pump Requirements:ft. TDH v	s GPM		inches below pip
			Aggregate Depth: inches above pi
Conditions:			inches tot
WATER LINES (INCLUDING IRRIGATION) NO UTILITIES ALLOWED IN INITIAL OR I			EPAIR AREA.
**If applicable: / understand the system type	specified is different from	the type specified on the application.	I accept the specifications of this permit.
	specifica to american	4/2- 4	
Owner/Legal Representative Signature:			Date:
This Construction Authorization is subject to regocation if the	e site plan, plat, or the intended us	changes. The Construction Authorization shall not be	e transferred when there is a change in ownership of the site. This
Construction Authorization is subject to compliance with the			
Authorized State Agent:		Date: _	
demany	West reus - cons	Date: _ struction Authorization Expiration Da	He: 910 91

HTE# 17-5-40609

Permit # 29309

Harnett County Department of Public Health Site Sketch

ISSUED TO: 1-10010 Comeson	PROPERTY LOCATON: Harrington Rd. (SR 1291) SUBDIVISION LOT #
Authorized State Agent:	3 y (OLIVER TOLKSDORF) Date: 2/8/17
	REHS-I.
25% Reduction Repair Alea 40	150' 150' 150' 150' 150' 150' 150' 150'
247)	
HARRINGTON ROAD (SR 2026)