29602

HTE# 17-5-409758 Harnett County Department of Public Health

Improvement Permit

A building permit ca	PROPERTY LOCATION: SR 1948 K	
ISSUED TO Royal Dates Builde Cap	SUBDIVISION ATUSTIVES VE	LOT # 36
NEW REPAIR EXPANSION Type of Structure:	Site Improvements regi	uired prior to Construction Authorization Issuance:
Type of structure.		
Proposed Wastewater System Type: 2502 New	_	
Projected Daily Flow: GPD		
Number of bedrooms: Number of Occupants:	max	
Basement Yes Mo	2	
Pump Required: ☐Yes ☐ No ☐ May be required based on final		
	ance from well feet	Permit valid for: Five years
Permit conditions:		□ No expiration
	,	
Authorized State Agent: James & Manhaat	Date: 7-6-	SEE ATTACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guarantees the issuance of ot	her permits. The permit holder is responsible for chec	king 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 Improveme	nt Permit shall not be affected by a change in owner	ship 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		
<u>Lonst</u>	ruction Authorization	
	equired for Building Permit)	
The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .195 with the attached system layout.	7, .1958. and .1959 are incorporated by references in	nto this permit and shall be met. Systems shall be installed in accordance
ISSUED TO: Royal Orates Burdling Gnp Facility Type: SP	PROPERTY LOCATION 5 44	
0 //	SUBDIVISION ATTURNS	Vellage LOT # 36
Facility Type:	Expansion Repair	1
Basement? Yes No Basement Fixtures? Yes	☑ No	2.
Type of Wastewater System** 25% Research	-845 th	(Initial) Wastewater Flow: _3es GPD
(See note below, if applicable □)		
25%/ LH13	(Repair)	
Installation Requirements/Conditions Number of tree	iches 3	
Septic Tank Size gallons	each trench feet	Trench Spacing: Feet on Center
	be installed on contour at a	Soil Cover: inches
	th Depth of: inches	(Maximum soil cover shall not exceed
	s shall be level to +/-1/4"	36" above the trench bottom)
in all directions		/
Pump Requirements:ft. TDH vs GPM	,	inches below pipe
		Aggregate Depth: inches above pip
Conditions:		inches tota
		There's total
WATER LINES (INCLUDING IRRIGATION) MILET DE 10ET EROM	ANV DADT OF CEDTIC CYCTEM OD D	EDAID ADEA
WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM		EFAIR AREA.
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD AR	tA.	
**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, or the intended us		
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		
5 M.	fe	7
Authorized State Agent: Award	Date: _	
Cons	truction Authorization Expiration Da	10. 7-10-77

HTE# 17-5-4097517 Harnett County Department of Public Health Site Sketch

	PROPERTY LOCATON: 30/488 AFTER SOLD SUBDIVISION ATTERNS UT CLARGE LOT # 36 Markad Creans Date: 7-6-17	
ISSUED TO: Kogal Daks Bu	ilde Gage SUBDIVISION ATTERNS UTCLESCE LOT # 36	
Authorized State Agent:	E Mahad CREAS Date: 7-10-17	
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