| HTE# 17-5-40988 Harnett County Department of F | Public Health 29199 |
|---|---|
| Improvement Permit | |
| | 3 Antioch CHurch RD |
| NEW 12 REPAIR EXPANSION Site Improvement | $_$ LOT $\#$ $_$ \swarrow |
| Proposed Wastewater System Type: <u>25% Reductors</u> Projected Daily Flow: <u>360</u> GPD | ×2 e |
| Number of bedrooms: Number of Occupants: max Basement 🗆 Yes 🕞 No | |
| Pump Required: Yes No May be required based on final location and elevations of facilities Type of Water Supply: Community Public Well Distance from well fee Permit conditions: | |
| Mail HEREAS | |
| Authorized State Agent: Date: | |
| Construction Authorization | <u>1</u> |
| (Required for Building Permit) The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .1957, .1958. and .1959 are incorporated by ref with the attached system layout. | erences into this permit and shall be met. Systems shall be installed in accordance |
| ISSUED TO: Signature Aone BIDAS PROPERTY LOCATION: SUBDIVISION | 1735 Antioch CHURCH NI |
| | epair |
| (See note below, if applicable \Box) | (Initial) Wastewater Flow: <u>360</u> GPD |
| Installation Requirements/Conditions Number of trenches | 9 |
| Pump Tank Size JOSO gallons Trenches shall be installed on contour at a Maximum Trench Depth of: | eet Trench Spacing: Feet on Center Soil Cover: inches ches (Maximum soil cover shall not exceed 36" above the trench bottom) |
| Pump Requirements:ft. TDH vs GPM | inches below pipe |
| Conditions: | Aggregate Depth: inches above pipe |
| WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM ANY PART OF SEPTIC SYSTEM NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD AREA. | OR REPAIR 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: | 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 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: Manhan Date: 3-31-17 Construction Authorization Expiration Date: 3-31-22 | |

