HTE# 17-5-4 133-6

Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: NC2105 ISSUED TO: CASLET ON CONST. CO. PROPERTY LOCATION SUBDIVISION Site Improvements required prior to Construction Authorization Issuance: Type of Structure: 550 (52753) Proposed Wastewater System Type: 25% REDUCTION SYSTEM Projected Daily Flow: 360 Number of Occupants: Number of bedrooms: ____3___ Basement Yes No May be required based on final location and elevations of facilities Pump Required: ☐Yes Type of Water Supply:

Community Public Well Distance from well feet Permit conditions: ■ No expiration Authorized State Agent::

Date: 5) Date: 6) Date: 7) Date: 7) Date: 7) Date: 8) Date 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 the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit... Construction Authorization (Required for Building Permit) 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 SX556m (Initial) Wastewater Flow: 360 25% REDUCTION Type of Wastewater System** (See note below, if applicable Installation Requirements/Conditions Number of trenches ______ feet Trench Spacing: _____ Feet on Center Number of trenches Septic Tank Size LOOO gallons Pump Tank Size _____ gallons Trenches shall be installed on contour at a Maximum Trench Depth of: ________ 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 _____ inches below pipe Aggregate Depth: ______ inches above pipe Conditions: 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 compliante 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: Construction Authorization Expiration Date: 5 22 22

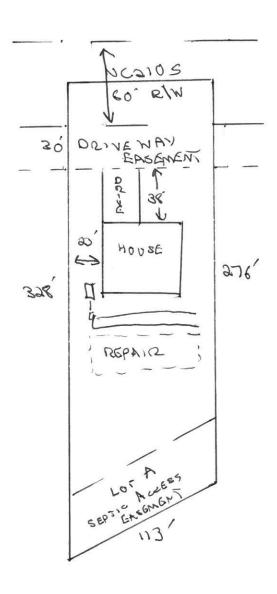
Harnett County Department of Public Health Site Sketch

Authorized State Agent: PROPERTY LOCATON: NC2105

PROPERTY LOCATON: NC2105

LOT # P

Date: 5 | Day 17



Department of Environment, Health and Natural Resources Division of Environmental Health On-Site Wastewater Section

Sheet: Property ID: Lot #: File #: Code:

SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

Owner: Ap	plicant:				
Address:		te Evaluated:			
Proposed Facility: 3	BORN De	sign Flow (.19	49): 360 40	Property Size:	
Location of Site:	Pro	perty Recorde			
Water Supply:	☐ Public ☐	Individual	☐ Well	☐ Spring	☐ Other
Evaluation Method:	Auger Boring	☐ Pit		Cut	
Type of Wastewater:	Sewage	☐ Indi	ustrial Process	☐ Mixed	

P R O F I L E	.1940 Landscape Position/ Slope %	Horizon Depth (In.)	SOIL MORPHOLOGY		OTHER PROFILE FACTORS				
			.1941 Structure/ Texture	.1941 Consistence Mineralogy	.1942 Soil Wetness/ Color	.1943 Soil Depth (IN.)	.1956 Sapro Class	.1944 Restr Horiz	Profile Class & LTAR
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Initial	Repair System	Other Factors (.1946):
System		Site Classification (.1948):
J ,	J	Evaluated By:
250	QD	Others Present:
1 6	17	
		System