HTE# 17-5-41745

Harnett County Department of Public Health

Improvement Permit

A	building permit cannot be issued wit	h only an Improvement	Permit	
C () 1	PROPERTY LOCA	TION: Clarend	on Ct. (old Stage	nd sa 1006)
ISSUED TO: Comfort Homes In	SUBDIVISION _	Oxford L	Docads	
NEW REPAIR □ EXPANSIO		Site Improvements rea	quired prior to Construction Author	ization Issuance:
Type of Structure: 382 (725' × 36')				
Proposed Wastewater System Type: 25% reducts	tion Sys.			
Projected Daily Flow: 366 GPD				
Number of bedrooms: 3 Number of Occup	pants:max			
Basement Yes No				
Pump Required: 🗆 Yes 🗆 No 🗆 May be requi	red based on final location and eleva	tions of facilities		
Type of Water Supply: Community Public Permit conditions:	☐ Well Distance from well	feet	Permit valid for:	☐ Five years ☐ No expiration
Authorized Costs August 7		07/18/17		
Authorized State Agent:	Date:			ACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guaran site is subject to revocation if the site plan, plat, or the intended use of the Laws and Rules for Sewage Treatment and Disposal and to condition	hanges. The Improvement Permit shall not be a	affected by a change in owne	cking with appropriate governing bodies in rship of the site. This permit is subject to	meeting their requirements. This compliance with the provisions of
	Construction Au	thorization		
	(Required for Buildi	ng Permit)		
The construction and installation requirements of Rules .1950, .1952, .19 with the attached system layout.	54, .1955, .1956, .1957, .1958. and .1959 an	e incorporated by references	into this permit and shall be met. Systems	shall be installed in accordance
ISSUED TO: Comfort Homes Inc	PROPERTY	LOCATION: Clase	ndon ct. (odstage 11	d sa loca)
Facility Type: 330 (725'x36') SFD	ZUBUIVISIU	N OXTOR	d Woods	LOI # <u>3z</u>
	The second secon	ion 🗆 Repair		
	ures? 🗆 Yes 🗆 No			
Type of Wastewater System** Pomp to	25% reduction	5.75 -	(Initial) Wastewater Flow: _	360 GPD
(See note below, if applicable □)	10, 1	/B		
	5/0 red 5/5.			
Installation Requirements/Conditions	Number of trenches 3		a	
Septic Tank Size <u>\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \</u>	Exact length of each trench	70 feet	Trench Spacing:	Feet on Center
Pump Tank Size 1000 gallons	Trenches shall be installed on co	ntour at a	Soil Cover: i	nches
	Maximum Trench Depth of:	Z4 inches	(Maximum soil cover shall n	ot exceed
	(Trench bottoms shall be level to		36" above the trench botto	
	in all directions)		30 above the trench botto	omj
Pump Requirements:ft. TDH vs			6	
1 ump nequirements1t. 1011 43	_ 0111			inches below pipe
Conditions:			Aggregate Depth:	inches above pipe inches total
NATER LINES (INCLUDING IRRIGATION) MUST B	E 10FT. FROM ANY PART OF SE	PTIC SYSTEM OR R	EPAIR AREA.	
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DI	KAIN FIELD AKEA.			
**If applicable: / understand the system type specified	is different from the type specifie	d on the application.	I accept the specifications of ti	his permit.
Owner/Legal Representative Signature: This Construction Authorization is subject to revocation if the site plan, pl			Date:	
This Construction Authorization is subject to revocation if the site plan, pl	at, or the intended use changes. The Construct	ion Authorization shall not b	e transferred when there is a change in ow	nership 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 condition	ns of this permit. SEE A	ATTACHED SITE SKETCH
Authorized State Agents	and a see no.	<i>-</i>	6211.01.0	
Authorized State Agent:	Mun, My		07/18/17	
	Construction Authori:	zation Expiration D:	ate: 07/18/77	

HTE#	17	-5-	41	745	

Permit # _____ 29579

Harnett County Department of Public Health Site Sketch

	PROPERTY LOCATON:_	clarendo	on Ct. Cold	Stax &d. N	50 1006
ISSUED TO: Comfort Hones Inc.	SUBDIVISION	Oxford	woods	LOT # _	32
Authorized State Agent:		EHE No.	to: 07/1	2117	

