HTE#17-5-41778

Harnett County Department of Public Health

36" above the trench bottom)

Improvement Permit

Α	building permit cannot be issued w			
MV	PROPERTY LOC	ATION: HEATHG	2NOOD UR	
ISSUED TO: MCKEE HOMES LL		OAKMONT		LOT # 174
NEWX REPAIR D SPO (39'265) EXPANSIO	DN 🗆	Site Improvements re-	quired prior to Construction Autho	rization Issuance:
Type of Structure: 343 (37 AS)		(/ <u>*****</u>		
Proposed Wastewater System Type: 25% REDUC	JUDY JYDLEW			
Projected Daily Flow: 360 GPD	C	8 		
Number of bedrooms: Number of Occu	pants: <u> </u>			
Basement Yes No		2 <u></u>		
Pump Required: 🗆 Yes 🛛 🗙 No 🔅 🗆 May be requ	ired based on final location and elev	ations of facilities		~ /
Type of Water Supply: Community Public	☐ Well Distance from well _	feet	Permit valid for:	Five years
Permit conditions:				No expiration
1910				
And share a second seco	RGH) Date	7/26/17		
Authorized State Agent:	Dutt:		SEE ATI	TACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guara site is subject to revocation if the site plan, plat, or the intended use	changes. The Improvement Permits, The perm	affected by a change in own	cking with appropriate governing bodies in within of the site. This permit is subject to	n meeting their requirements. This
the Laws and Rules for Sewage Treatment and Disposal and to condition	ns of this permit.	uncered by a change in own	issue of the site. This permit is subject to	compnance with the provisions of
	Construction Au	Ithorization		
	(Required for Build			
The construction and installation requirements of Rules .1950, .1952, .1 with the attached system layout.			into this permit and shall be met. Systems	s shall be installed in accordance
ISSUED TO: MEKEE 1-lomes L2	PROPERT	LOCATION: HER	HERWOOD Da	
		ON OPAKMONT		LOT #178
Facility Type: SED(39,~65)	🛛 New 🗆 Expan			
Paramant? Vac N Na Paramant Fin		1		
Type of Wastewater System** 25% D	COUGEION Staten		(Initial) Wastewater Flow:	360 GPD
(See note below, if applicable \Box)			(IIIIIai) Wastewater 110w.	
_25% 1	200. 505.	(Repair)		
Installation Requirements/Conditions	Number of trenches			
Septic Tank Size <u>1000</u> gallons	Exact length of each trench	AHO feet	Trench Spacing:	Feet on Center
Pump Tank Size gallons	Trenches shall be installed on o			inches
0	Maximum Trench Depth of:		(Maximum soil cover shall)	
		inclies	1	INC UNCLUM

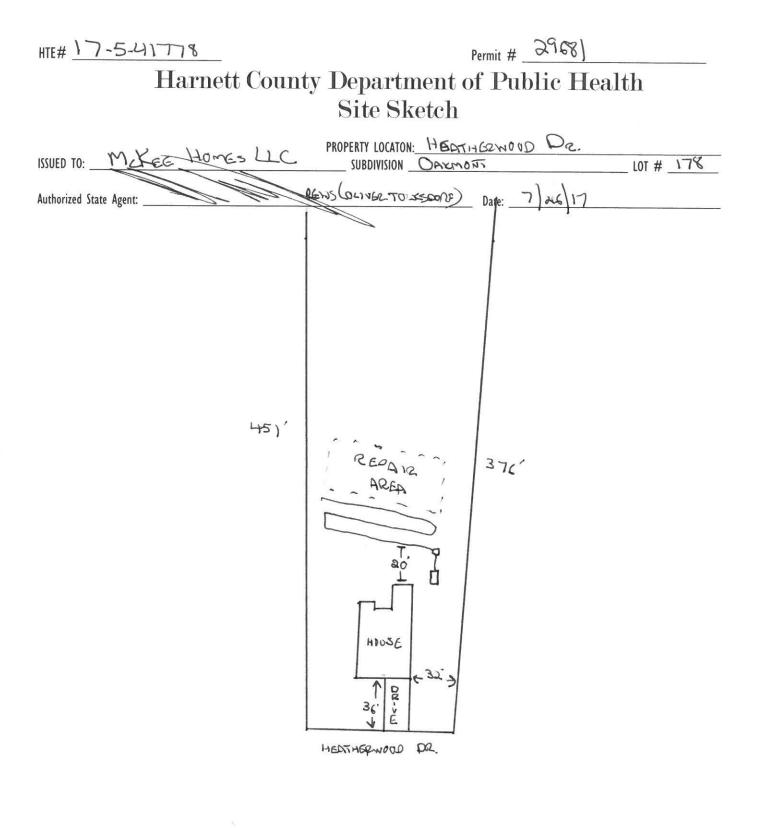
Pump Requirements: _____ft. TDH vs. _____ GPM Aggregate Depth: ______ inches below pipe Conditions: _____ inches total

(Trench bottoms shall be level to +/-1/4"

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.

in all directions)

**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 Authoriza	ation 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	d to the conditions of this permit. SEE ATTACHED SITE SKETCH
Authorized State Agent:Construction Authorization Ex	Date: 7)267 (piration Date: 7)2622



Department of Environment, Health and Natural Resources Division of Environmental Health On-Site Wastewater Section					Sheet: Property ID: Lot #: File #:			,	
SOIL/SITE EVALUATION Code: for ON-SITE WASTEWATER SYSTEM							<u></u>		
Locati Water Evalu	ess: sed Facility: ion of Site:	l: Auge	Date Desi Pror	e Evaluated: 7) & gn Flow (.1949): 3 berty Recorded: Individual Pit Industrial	Well	ng 🗌 Oth	er		
P R O F I .1940			SOIL MORPHOLOGY OTHER .1941 PROFILE FACTORS						
L E #	Landscape Position/ Slope %	Horizon Depth (In.)	.1941 Structure/ Texture	.1941 Consistence Mineralogy	.1942 Soil Wetness/ Color	.1943 Soil Depth (IN.)	.1956 Sapro Class	.1944 Restr Horiz	Profile Class & LTAR
1	15 57		0 - 18	C SZ VER	turbup				
			19-36	SBK SC2 FM					+ 5 - 375
2			6-2	ESL VR	in restro				
			6-34	ES2 VE	in ssise				P5 · 385
								~	
Descri	ption	In	itial R	epair System	Other Factors (.1946)	:			

Description	System	Repair System	Other Factors (.1946): Site Classification (.1948):	
	System			
Available Space (.1945)		-	Evaluated By:	
System Type(s)	25011	1960	Others Present:	
Site LTAR	.37	5 .325		

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