29598

HTE# 17-5-41933 Harnett County Department of Public Health

Improvement Permit

A b	uilding permit cannot be issued with only an Impr	ovement Permit	4 - 111-23	
Tail 1 0	PROPERTY LOCATION: 814	Cokesbury Parte Ln. (SR 1403)	
ISSUED TO: IF angle Home Pros	LLL SUBDIVISION _ CGRES	bury Park	LOT # <u>67</u>	
NEW REPAIR D EXPANSION	☐ Site Improvem	ents required prior to Construction Authoriz	ation Issuance:	
Type of Structure: 3302 47'x58' SF	D			
Proposed Wastewater System Type: 25% reduction	in 595.			
Projected Daily Flow: 360 GPD				
Number of bedrooms: 3 Number of Occupa	nts: E max			
Basement Yes No				
	d based on final location and elevations of facilities	25	/	
Type of Water Supply: Community Public			Five years	
Permit conditions:			☐ No expiration	
			ALTER SOUR BOOK STATES	
1				
Authorized State Agent::	1245 Date: 08/	1/2017 SEE ATTA	CHED SITE SKETCH	
The issuance of this permit by the Health Department in no way guarantees the issuance of other permits. The permit holder is responsible for checking 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 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	n .		
	Makes to the Art which according to a commit	<u> </u>		
	(Required for Building Permit)			
The construction and installation requirements of Rules .1950, .1952, .195	1, .1955, .1956, .1957, .1958. and .1959 are incorporated by	references into this permit and shall be met. Systems s	hall be installed in accordance	
with the attached system layout.				
Facility Type: 332 47×56' 550	/ / C DRODERTY LOCATION	817 COKASHIE DECK L	0 (52 1403)	
130ED TO. TO TANGE GOME PLOS.	FROTERIT LOCATION.	ort so esogg to re	107 # 6 7	
222 117	SORDIVISION CO	Kesburg Parke	LUI # +	
Facility Type: 302 4+x5 5-5	_ Mew Expansion	Repair		
Basement? Yes No Basement Fixtu	res? 🗌 Yes 🔲 No			
Type of Wastewater System** 25% neduction 375 tem (Initial) Wastewater Flow: 360 GPD				
(See note below, if applicable □)				
at - Conda 7	15% Red. Sys. (Repair)			
	Number of translate 5			
Installation Requirements/Conditions	Number of trenches	9		
Septic Tank Size 1000 gallons	Exact length of each trench50	feet Trench Spacing:		
Pump Tank Size gallons	Trenches shall be installed on contour at a	Soil Cover: ir	iches	
	Maximum Trench Depth of:	inches (Maximum soil cover shall no	ot exceed	
	(Trench bottoms shall be level to +/-1/4"	36" above the trench botto		
	in all directions)			
D	NAME SHAPPER TO PROGRAM SHAPPER SHAPPE	G	inches heless nine	
Pump Requirements:ft. TDH vs	GPM		inches below pipe	
		Aggregate Depth:	inches above pipe	
Conditions:			inches total	
2				
WATER LINES (INCLUDING IRRIGATION) MUST B	I OFT FROM ANY PART OF SEPTIC SYSTE	M OR REPAIR AREA		
		M OK KEI AIK AKEA.		
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DI	AIN FIELD AKEA.			
**If applicable: / understand the system type specified	is different from the type specified on the app	plication. I accept the specifications of ti	his permit.	
The approach and the system type specimes	s american norm and type specimes on the app		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Owner/Level Bernessessing Company	David			
vner/Legal Representative Signature: Date:			1. (.) ***	
CEE ATTACHED CITE CHETCH				
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				
1 1 1				
Authorized State Agent:	well sets	Date: 08/11/2017		
but a second				
Construction Authorization Expiration Date: <u>OB/11/2009</u>				

Harnett County Department of Public Health Site Sketch