Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only an Improvement Permit ISSUED TO: Combestand Homes Inc. Subdivision The reserve LOT # 19 NEW ☐ REPAIR ☐ EXPANSION ☐ Site Improvements required prior to Construction Authorization Issuance: Type of Structure: 437 761×681 51=15 Proposed Wastewater System Type: 25% reduction 555. Projected Daily Flow: 48c GPD Number of bedrooms: _____ & ___ Number of Occupants: ___ & ___ max Basement Yes 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 _______feet Permit valid for: Five years Permit conditions: ☐ No expiration Authorized State Agent:: CE ATTACHED 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** (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 ISSUED TO: Combastand Homes Inc. PROPERTY LOCATION: Trophy ridge (Rollins Rd. SR 1412) SUBDIVISION The Reserve LOT # 19 Facility Type: 4312 781 × 681 5000 New Expansion Repair Basement? Yes No Basement Fixtures? Yes No Type of Wastewater System** 25% reduction 575 Zem (Initial) Wastewater Flow: 480 GPD (See note below, if applicable Pump to 25% ned System (Repair) Number of trenches 3 | See | S Installation Requirements/Conditions Septic Tank Size \ \200 gallons Pump Tank Size _____ gallons Soil Cover: 14 inches Trenches shall be installed on contour at a Maximum Trench Depth of: ZG inches (Maximum soil cover shall not exceed (Trench bottoms shall be level to +/-1/4" 36" above the trench bottom) in all directions) Aggregate Depth: Sinches below pipe inches above pipe Pump Requirements: ______ft. TDH vs. GPM Conditions: 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 compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit. Authorized State Agent: Charles Date: Date Construction Authorization Expiration Date: 08/25/605%

HTE#	17-5-42026	
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Permit # _____ 29213

Harnett County Department of Public Health Site Sketch

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