29235

HTE# 17-5-47413 Harnett County Department of Public Health

Improvement Permit

A	building permit cannot be issued with only an Improvement	ictoria Hills Dr. South
ISSUED TO: Michael Anderson	Homes SUBDIVISION Victori	a Hills TI LOT # 94
NEW REPAIR TO EXPANSION	N Cita Improvements re	equired prior to Construction Authorization Issuance:
Type of Structure: 382 394" x 59 10"	SI=>	quired prior to construction Authorization issuance.
Proposed Wastewater System Type: 25% Nedac		
Projected Daily Flow: 366 GPD		
Number of bedrooms: Number of Occu	pants: 6 max	
Basement Yes No		
Pump Required: Tes No May be required:	ired based on final location and elevations of facilities	
Type of Water Supply: Community Public		Permit valid for: Five years
Permit conditions:		No expiration
7 1		
Authorized State Agent::	10/12/2	CEE ATTACHED CITE CUETCH
The issuance of this permit by the Health Department in no way guara	ntees the issuance of other permits. The permit holder is responsible for cl	SEE ATTACHED SITE SKETCH recking 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 own	nership of the site. This permit is subject to compliance with the provisions of
the Laws and Rules for Sewage Treatment and Disposal and to condition	us of this permit	entre voice and former is any other and prove
	Construction Authorization	
	(Required for Building Permit)	
The construction and installation requirements of Rules .1950, .1952, .1	954, .1955, .1956, .1957, .1958. and .1959 are incorporated by reference:	into this permit and shall be met. Systems shall be installed in accordance
with the attached system layout.		
ISSUED TO: Michael Anderson K	AGMOS PROPERTY LOCATION: 556	Victoria Hills Dr. S.
	SUBDIVISION 1/2+tree	Victoria Hills Dr. So ia Hills II LOT # 94
Facility Type: 387 394" x 59'10" 5 FE	≥ New □ Expansion □ Repair	
	tures? Yes No	
		(Livin W.) 11 366 cm
	reduction 3 ysters	(Initial) Wastewater Flow: GPD
(See note below, if applicable □)	And a company	
	duction 575. (Repair)	
Installation Requirements/Conditions	Number of trenches 3	9
Septic Tank Size 1 Coc gallons	Exact length of each trench 90 feet	Trench Spacing: Feet on Center
Pump Tank Size gallons	Trenches shall be installed on contour at a	Soil Cover: 6-8 inches
	Maximum Trench Depth of: 18-30 inches	(Maximum soil cover shall not exceed
	(Trench bottoms shall be level to +/-1/4"	36" above the trench bottom)
	in all directions)	The second of State of Secondary State Community
Pump Requirements:ft. TDH vs	GPM	inches below nine
		Aggregate Depth: inches below pipe inches above pipe inches total
Conditions:		Negregate peptil.
		Inches total
WATER LINES (INCLUDING IRRIGATION) WHIST E	E TOET EDOM ANY DADT OF CERTIC CYCTEM OR	DEDAID ADEA
	E 10FT. FROM ANY PART OF SEPTIC SYSTEM OR	KEPAIK AKEA.
NO UTILITIES ALLOWED IN INITIAL OR REPAIR D	KAIN FIELD AKEA.	
**If applicable: / understand the system type specified	is different from the type specified on the application	. I accept the specifications of this permit.
	The Boston of the State of the	a se socio I co situació l 'ocasimistra como con conceso l concessor.
Owner/Legal Representative Signature:		Date:
This Construction Authorization is subject to revocation if the site plan, p	lat, 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: Date: 10/12/2017		
ANDREW CURRIN Construction Authorization Expiration Date: 10/12/2022		
- 12:21	The state of the s	

Harnett County Department of Public Health Site Sketch

