HTE#<u>17-5-434</u>³⁴ Harnett County Department of Public Health Improvement Permit A building permit cannot be issued with only an Improvement Permit

A building permit cannot be issued with only an improvement remit	
PROPERTY LOCATION: 5098 NC 27 East	
ISSUED TO: William + Ranae Puckett SUBDIVISION LOT #	
NEW 🖬 REPAIR 🗆 EXPANSION 🗆 Site Improvements required prior to Construction Authorization Issuance:	
Type of Structure: SB1 138 × 1091 SED	
Proposed Wastewater System Type: 25% reduction Sp.	
Projected Daily Flow: 600 GPD	
Number of bedrooms: <u>G</u> Number of Occupants: 13 max	
Basement Yes INO	
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 100 + feet Permit valid for: Five years	
Permit conditions:	n
1 es	
Authorized State Agent: Coller, ACHS Date: 13/01/3017 SEE 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 requirement	nts. 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 prov	isions of
the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.	

Construction Authorization

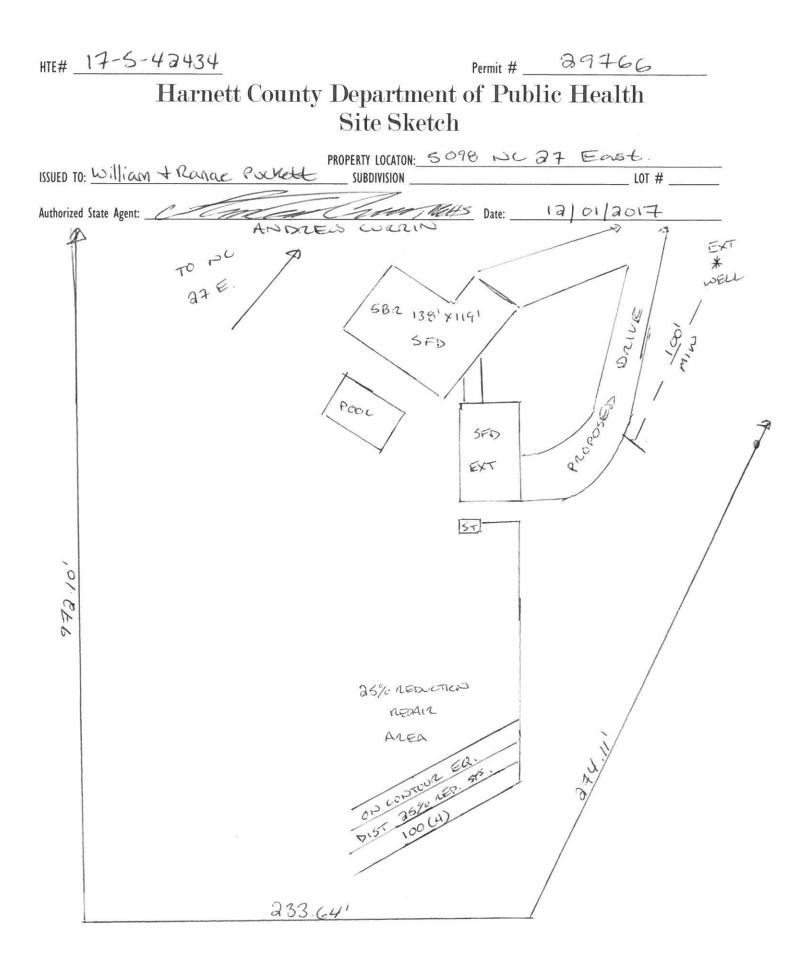
(Required for Building Permit)

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 with the attached system layout.

SUBDIVISION	ISSUED TO: William + Range Pu	scketch PROPERTY LOCATION: 50	98 NC 27 East
Basement? Yes No Type of Wastewater System** 25% No (Initial) Wastewater Flow: 600 GPD		SUBDIVISION	LOT #
Type of Wastewater System** 25% Reduction 515. It (Initial) Wastewater Flow: 600 GPD	Facility Type: 5BC 139 X119 SFD	🔄 New 🗆 Expansion 🗆 Repair	
	Basement? 🗌 Yes 🗖 No Basement Fixto	ures? 🗆 Yes 🔲 No	
	Type of Wastewater System**	Reduction SIS. IT	(Initial) Wastewater Flow:GOC GPD
(bee note below, in appreciate ()	(See note below, if applicable)		
35% reduction 5/3. (Repair)	35% red	Location 5/3. (Repair)	
Installation Requirements/Conditions Number of trenches (Repair)	Installation Requirements/Conditions	Number of trenches4	
Septic Tank Size 1250 gallons Exact length of each trench 100 feet Trench Spacing: 9 Feet on Center	Septic Tank Size <u>1 えらの</u> gallons	Exact length of each trench feet	Trench Spacing: Feet on Center
Pump Tank Size gallons Trenches shall be installed on contour at a Soil Cover: inches	Pump Tank Size gallons	Trenches shall be installed on contour at a	Soil Cover: inches
Maximum Trench Depth of: $\underline{24}$ inches (Maximum soil cover shall not exceed		Maximum Trench Depth of: $\underline{A4}$ inches	(Maximum soil cover shall not exceed
(Trench bottoms shall be level to $+/-1/4$ " 36" above the trench bottom)		(Trench bottoms shall be level to +/-1/4"	36" above the trench bottom)
in all directions)		in all directions)	
Pump Requirements:ft. TDH vs GPMinches below pip	Pump Requirements:ft. TDH vs	GPM	inches below pipe
Aggregate Depth: inches above pi			Aggregate Depth: inches above pipe
Conditions: inches tot	Conditions:		inches total

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 differen	nt from the type specified on the application. I a	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 inte	tended use changes. The Construction Authorization shall not be tra	unsferred when there is a change in ownership of the site. This
Construction Authorization is subject to compliance with the provisions of the Laws and	I Rules for Sewage Treatment and Disposal and to the conditions of	f this permit. SEE ATTACHED SITE SKETCH
Authorized State Agent: C	Construction Authorization Expiration Date:	12/01/2017



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									
Wate	ess: SOHB osed Facility: tion of Site: r Supply:	532 5	Desi	erty Recorded: He	Vell Cut	g 🗌 Oth	er		
P R O F I L	.1940 Landscape		SOIL M	MORPHOLOGY OTHER .1941 PROFILE FACTORS		1			
E #	Position/ Slope %	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
١	L 4%	0-12	& us	VER SSR KG					PS
		12-48	BU SUL	VAL 3598 449 FAL 5 (469		48			0.4
2	L 4%	0-12	62 25	VER HAR HERE					
		12-42	AL SUL Privent Mate	VEL HALLER					PS
		42+	Pevent	-		42			0.4
3	24%	016	in is	V42 5358 420					
		16-38	me su	V42 5888 420 Fa 5 ° 478					PS
		384	Pwert Mut.			39			0.4
							E terraria		
Descrip		Sy	itial Re	pair System Site	Other Factors (.1946): e Classification (.1948):	Provalence	- Suit	alale	
System			5% us a	Sto up	e Classification (.1948): Evaluated By: Others Present:	Andrew	corrin, 1	Ere	
Site LT/	AR		0.4	0.4				0	