29918

HTE#\_18-5-43467

## Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only an Improvement Permit	12 1006		
PROPERTY LOCATION: 75 Claredon Ct. (Old	Sterge (2. S.)		
ISSUED TO: Comfort Homes, Inc. SUBDIVISION OXFORD Woods	LOT # <u>24</u>		
NEW REPAIR EXPANSION Site Improvements required prior to Construction Autho	rization Issuance:		
Type of Structure: 362 72 × 361 STO			
Projected Daily Flow:366 GPD			
Number of bedrooms:			
Basement Yes 4No			
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:  Permit conditions:	☐ Five years ☐ No expiration		
Authorized State Agent:: C3116/2018 SEE AT	TACHED CITE CHETCH		
Authorized State Agent::  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 is 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 the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.	TACHED SITE SKETCH in meeting their requirements. This o compliance with the provisions of		
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. System	ns shall be installed in accordance		
with the attached system layout.			
ISSUED TO: Comfort Homes, Fra. PROPERTY LOCATION: 75 Claredon Ctol	old Staxe 11.5		
Facility Type: 362 72' x 361 5 D PNew Expansion Repair	LUI #		
	300 000		
Type of Wastewater System** 25% Reduction 5,5tem (Initial) Wastewater Flow:	3CO GPD		
(See note below, if applicable )			
25% reduction 5/5. (Repair)			
Installation Requirements/Conditions  Number of trenches 4	r		
Septic Tank Size \( \sum \cdot	_ Feet on Center		
Pump Tank Size gallons	inches		
Maximum Trench Depth of: 18 inches (Maximum soil cover shall			
(Trench bottoms shall be level to +/-1/4" 36" above the trench bo	ttom)		
in all directions)			
Pump Requirements:ft. TDH vs GPM	inches below pipe		
Aggregate Depth:	inches above pipe		
Conditions: System installed tight to STO, 15ft draining ESMT	inches total		
Setback			
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.			
** f 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 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.  SEE ATTACHED SITE SKETCH			
The state of the s	JAETER TOTAL		
Authorized State Agent:			
ANDREW CURLIN Construction Authorization Expiration Date: 03/16/2023			

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Permit # 29918

## Harnett County Department of Public Health Site Sketch

Authorized State Agent:  Authorized State Agent:  ANDRE		Slavedon Ct. ( Ford words S Date: 03/1	LOT # <u>3</u> 7
UNSUITABLE	WETLANDS	40)	
25% UFO. SYS	REPAIR AREA	1004C	System shall be installed as tight to SFID as contour and state setbaces will allow
B 3	62 SED 12' Y 36'	30' Per	sft lateral rainage setback required
13	PART 1  REPAIR  1635	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	