HTE#08-520734

Harnett County Department of Public Health

25169

Improvement Permit

A	building permit cannot be issued with only an	43.4		
ISSUED TO: BEHNIE WILLIAMS	PROPERTY LOCATION:	HWYT	01	
NEW REPAIR □ EXPANSIO	SUBDIVISION			LOT #
Type of Structure: A DELANGE HANGER	7000 8 r ²)	rovements rec	quired prior to Construction Autho	orization Issuance:
Proposed Wastewater System Type: Rume To	danks = lank			
Projected Daily Flow: GPD	DAVEN 18NAL			
Number of bedrooms: Number of Occup				
	rants:max			
Basement Yes No				
Pump Required: Yes No May be required:	red based on final location and elevations of fa	_		_
Type of Water Supply: Community Public	Well Distance from well 100	feet	Permit valid for:	Five years
Permit conditions: SEB WELL PEARING	FOIL MELL LOCKION		***************************************	☐ No expiration
				u
		100		
Authorized State Agent::	03 Date: 1 12		SEE AT	TACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guaran	itees the issuance of other permits. The permit holder is re	esponsible for che	cking with appropriate governing bodies i	in meeting their requirements. This
site is subject to revocation if the site plan, plat, or the intended use of the Laws and Rules for Sewage Treatment and Disposal and to condition	nanges. The improvement Permit shall not be affected by a	a change in own	ership of the site. This permit is subject to	o compliance with the provisions of
the bars and nates for senage freatment and bisposal and to condition	s or ans perint			
		. •		
	Construction Authoriz	<u>ation</u>		
	(Required for Building Permi	it)		
The construction and installation requirements of Rules .1950, .1952, .19 with the attached system layout.			into this permit and shall be met. System	ns shall be installed in accordance
Ω \Ι				
ISSUED TO: <u>BENNIE WILLIAMS</u>	PROPERTY LOCATIO	N: Hm	y 401	
	SUBDIVISION			LOT #
Facility Type: AIRPLANE HANGER (700	New 🗆 Expansion	☐ Repair		
	cures? 🗆 Yes 🔀 No			
	CONVENTIONAL		(Initial) Wastewater Flow:	lad con
(See note below, if applicable (1)			(IIIIIai) Wastewater riow.	GPD GPD
Pump To	CONVENTIONAL (Repair))		
Installation Requirements/Conditions	Number of trenches			
Septic Tank Size 1000 gallons	Exact length of each trench 50	feet	Trench Spacing:	Feet on Center
Pump Tank Size 1000 gallons	Trenches shall be installed on contour at			inches
84.10.10	Maximum Trench Depth of: 12			
	•		(Maximum soil cover shall	
	(Trench bottoms shall be level to +/-1/4	ľ	36" above the trench bot	ttom)
	in all directions)		<i>y</i> .	
Pump Requirements:ft. TDH vs	_ GPM		6	inches below pipe
.			Aggregate Depth: 2	inches below pipe inches above pipe
Conditions: <u>SUMPLY LINE SHOULD BE</u>	E AT LEAST 30" BELOW G	anvosi	, 000	12 inches total
**If applicable: I understand the system type specified	is different from the time enecified on the		1 4 : 6 - : - : (
**If applicable: I understand the system type specified	is unierent from the type specified on the	application.	i accept the specifications of	this permit.
) /I I I I I I I I I I I I I I I I I I I				
Owner/Legal Representative Signature: his Construction Authorization is subject to revocation of the olan, p			Date:	
his Construction Authorization is subject to revocation if the time plan, p	lat, or the intended use changes. The Construction Authoriz	ration shall not b	e transferred when there is a change in	ownership of the site. This
onstruction Authorization is subject to compliance with the provisions of	the Laws and Rules for Sewage Treatment and Disposal an	nd to the condition	ons of this permit. SEE	ATTACHED SITE SKETCH
Authorized State Agent:	es a little	Date:	1/24/09	
0	Construction Authorization E	vnivatian N	- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	CONSTITUENTIAN WARREN	ADITALION D	att. 1114114	

HTF#	08-5-20734
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Harnett County Department of Public Health Site Sketch

