HTE# Repair

Harnett County Department of Public Health

25835

Improvement Permit

	building permit cannot be issued with only an Improvement PROPERTY LOCATION: 261	0 11 11 1	
ISSUED TO: / laria Cartelve	SUBDIVISION_	LOT #	
NEW ☐ REPAIR ■ EXPANSIO	N Site Improvements re-	quired prior to Construction Authorization Issuance:	
Type of Structure: SFD		quite provide construction nationization issuance.	
Proposed Wastewater System Type: Pump to 2	To Reduction System		
Projected Daily Flow: 366 GPD			
Number of bedrooms: 2 Number of Occu	pants: 6 max		
Basement Yes No			
Pump Required: ☐ Yes ☐ No ☐ May be requ	ired based on final location and elevations of facilities		
Type of Water Supply: Community Public	□ Well Distance from well 50 feet ^~~.	Permit valid for: Five years	
Permit conditions:		No expiration	
not	· Pritt ala		
Authorized State Agent:: 1 Sugar Mo	in REHS Date: 3/2/201	SEE ATTACHED SITE SKETCH	
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 che	cking with appropriate governing bodies in meeting their requirements. The	
the Laws and Rules for Sewage Treatment and Disposal and to condition	hanges. The Improvement Permit shall not be affected by a change in owners of this permit.	ersnip of the site. This permit is subject to compliance with the provisions	
	00-00-00 pp. 00-00-00-00-00-00-00-00-00-00-00-00-00-		
	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 references	into this parmit and shall be most Systems shall be installed in	
with the attached system layout.			
M. Chical	PROPERTY LOCATION: 26 SUBDIVISION New Expansion Repair	18-11/1	
ISSUED 10: 1 laria Castelvet	PROPERTY LOCATION: 26	1 Nussell Hogan ha.	
	SUBDIVISION	LOT #	
Facility Type: SFD	New Expansion Repair		
Basement? Yes No Basement Fix	tures? 🗌 Yes 🔲 No		
Type of Wastewater System**		(Initial) Wastewater Flow: GPD	
(See note below, if applicable □) ○			
Tump to	25% Reduction (Repair)		
Installation Requirements/Conditions	Number of trenches		
Septic Tank Size Existing gallons	Exact length of each trench feet	Trench Spacing: Feet on Center	
Pump Tank Size / COO gallons	Trenches shall be installed on contour at a	Soil Cover: 6-12 inches	
ganons	Maximum Trench Depth of: 18-24 inches		
		(Maximum soil cover shall not exceed	
	(Trench bottoms shall be level to +/-1/4"	36" above the trench bottom)	
Duma Bassissanatu (c. TDII	in all directions)		
Pump Requirements:ft. TDH vs	_ GPM	inches below pip	
Conditions: System to be ins	1111 - 1	Aggregate Depth: inches above pi	
Conditions: Oystem to de 115	talled as shown	inches tota	
**If applicable: / understand the system type specified	is different from the type specified on the application.	I accept the specifications of this permit	
	,, , , , , , , , , , , , , , , , , , , ,	accept and specimens of any permit.	
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 b	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 condition	ons of this permit. SEE ATTACHED SITE SKETCH	
Authorized State Agenty Sure MC/wai, LEHS Date: 3/2/2010			
8 1	Construction Authorization Expiration D	2/2/2017	
	CONSTRUCTION AUTHORIZATION Expiration D	ate. 3/2/2011	

Harnett County Department of Public Health Site Sketch

14	PROPERTY LOCATON:_	261 Rogell Hogas	hn.
ISSUED TO: Maria Cartelvetre	SUBDIVISION	,	LOT
		//	/
Authorized State Agent: June Main LE	H	Date: 3/2/2	0/0

* Contractor to meet on-site prior to installing system

