HTE#			

Harnett County Department of Public Health

Improvement Permit

26434

A building permit cannot	be issued with only an Improvement Permit						
	ROPERTY LOCATION: SR1535 ME+CLes (1725) UBDIVISION LOT #						
NEW □ REPAIR ☑ EXPANSION □	UBDIVISION LOT # Site Improvements required prior to Construction Authorization Issuance:						
Type of Structure: EX SFD	site improvements required prior to Construction Authorization Issuance:						
Proposed Wastewater System Type: 25% REISU ZIZON							
Projected Daily Flow: 360 GPD							
	YY						
Number of bedrooms: Number of Occupants: ma Basement □ Yes ☑ No	A.						
Pump Required: □Yes □ No ☑ May be required based on final locat	tion and elevations of facilities						
Type of Water Supply: Community Public Well Distance	from well 1001 feet Permit valid for. If Five years						
Permit conditions:	─────────────────────────────────────						
Interior to the form							
Authorized State Agent: July Description of this page to the Description of this page to the Description of the Page To the State Agent The Issuance of this page to the Description of	Date: 3 -23 - 11 SEE ATTACHED SITE SKETCH						
site is subject to revocation if the site plan, plat, or the intended use changes. The Improvement Pers	rmits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This mit shall not be affected by a change in ownership of the site. This permit is subject to compliance with the provisions of						
the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.	int stall life be allected by a change in ownership of the site. This permit is subject to compliance with the provisions of						
Construc	tion Authorization						
The construction and installation requirements of Rules 1950, 1952, 1954, 1955, 1957, 1957	ed for Building Permit)						
with the attached system layout.	58. and .1959 are incorporated by references into this permit and shall be met. Systems shall be installed in accordance						
T1. LT 3.1	4						
ISSUED TO: Johs + Theresa Broken	PROPERTY LOCATION: SN1535 Matchall 1215 SUBDIVISION LOT #						
CV 40							
Facility Type: New	Expansion Repair						
	I No						
Type of Wastewater System**	(Initial) Wastewater Flow: 360 GPD						
(See note below, if applicable □)							
25% REDUCTION Sys	(Renair)						
Installation Requirements/Conditions Number of trenches							
	9						
Maximum Trench De							
	Il be level to +/-1/4" 36" above the trench bottom)						
in all directions)							
Pump Requirements:ft. TDH vs GPM	inches below pipe						
	Aggregate Depth: inches below pipe						
Conditions:							
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.	TAKE OF SET TIC STSTEM ON REPAIR AREA.						
**If 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: Solution						
This Construction Authorization is subject to revocation if the site plan, plat, or the intended use chang	es. 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 Sewag	te Treatment and Disposal and to the conditions of this permit. SEE ATTACHED SITE SKETCH						
3 1 1	e chus						
Authorized State Agent: John S Man Date: 3-23-11 Construction Authorization Expiration Date: 3-23-16							
Constructi	ion Authorization Expiration Date: 3-23-16						

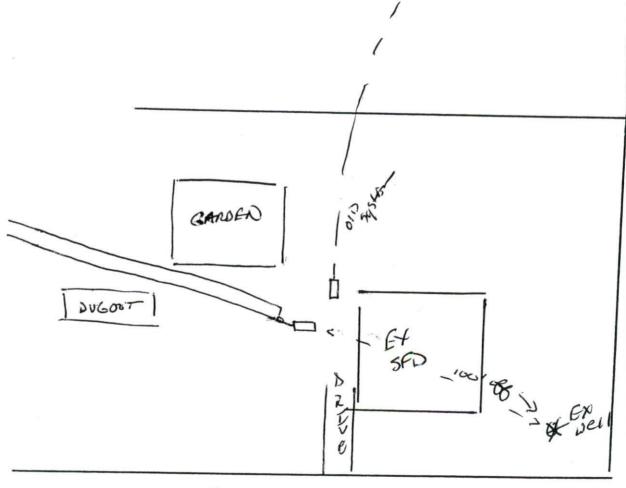
HTE#	

Permit # 26434

Harnett County Department of Public Health Site Sketch

	PROPERTY LOCATON: 344635	Motelell R	Δ
ISSUED TO JOHN & Theres Banker	SUBDIVISION		IOT #
Authorized State Agent Some & Man	LAN SERB	Date: 3-23-	11

#100' of of BA Well. WITH NEW TANK Pheoment.



SR

matchell 20