HTE# Repair

## Harnett County Department of Public Health

28713

Improvement Permit

	A building permit cannot be issued with only an Improvement Permit
S 11 1	PROPERTY LOCATION: 28 South Lagour Bluff
ISSUED TO: Scott Leonard	SUBDIVISION K: rby Estates LOT # 8
	ION   Site Improvements required prior to Construction Authorization Issuance:
Type of Structure: Existing MH	
Proposed Wastewater System Type: Exist	15
Projected Daily Flow:GPD	
Number of bedrooms: 7 Number of Occ	upants: max
Basement  Yes  No	
	uired based on final location and elevations of facilities
Type of Water Supply:   Community Public	□ Well Distance from well feet Permit valid for: \ y.r. □ Five years
Permit conditions:	—————————————————————————————————————
- /5 NE	
	Date: 2/11/2016 SEE ATTACHED SITE SKETCH
The issuance of this permit by the Health Department in no way gua	rantees the issuance of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This
site is subject to revocation if the site plan, plat, or the intended us	changes. The Improvement Permit 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 condit	ons of this permit.
	Construction Authorization
	(Required for Building Permit)
The construction and installation requirements of Rules 1950, 1952	(Nequired for building refinit) 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.	1737, 1735, 1736, 1737, 1730. and 1737 are incorporated by references into this permit and small be met. Systems small be installed in accordance
ISSUED TO: Scott Leonard	PROPERTY LOCATION: 28 South Logans Bloff  SUBDIVISION Kirby Estates LOT # 8  New Expansion Repair
	SUBDIVISION Kirby Estates LOT # 8
Facility Type: Existing MH	□ New □ Expansion □ Repair
Facility Type: Existing MH Basement? □ Yes □ No Basement F	xtures? Yes No
Type of Wastewater System**	
	(Initial) Wastewater Flow: GPD
(See note below, if applicable   )	
	(Repair)
Installation Requirements/Conditions	Number of trenches Existing
Septic Tank Size /00 0 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
	Maximum Trench Depth of: inches (Maximum soil cover shall not exceed
	(Trench bottoms shall be level to +/-1/4" 36" above the trench bottom)
	in all directions)
D B	CDV
Pump Requirements:ft. TDH vs	GPM inches below pipe
	Aggregate Depth: inches above pipe
Conditions: Det New Septicts	nk so existing plumbing transhame inches total
+ existing drain tield	nk so existing plumbing from home 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: / understand the system type specific	ed is different from the type specified on the application. I accept the specifications of this permit.
7,	and the specification of the approach. I accept the specifications of this period.
Owner/Legal Representative Cignature	D
Owner/Legal Representative Signature:	Date:
	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
/ }	
Authorized State Agent:	
Authorized State Agents Super M.	Construction Authorization Expiration Date: 2/11/20/6

HTE#	Repair

Permit # 28713

## Harnett County Department of Public Health Site Sketch

ISSUED TO: Scott Leonard Authorized State Agent: Lup Main	PROPERTY LOCATON: 28 South Lagar Bluff SUBDIVISION Kiby Estater  Date: 2/11/201	LOT #
New YAMAN IJ	m H	
	South Logar Bhfs	2