HTE# REPAIR

## Har t County Department of Public ealth

**Improvement Permit** 

ent Permit 29149

A building permit cannot be issued with only an Improvement Permit

Site Improvements required prior to Construction Authorization Issuance:   Type of Structure:   Type of Structur					107 11
Type of Water System Type:	ISSUED TO:	SUBDIVISION _			LOT #
Proposed Waterwater System Type:    GPD   Number of Deformon:   Number of Occupants:   max   Basement   Tes   No   May be required based on final location and elevations of facilities   Permit valid for:   Five years   Permit conditions:   Permit conditions:   Permit conditions:   Permit conditions:   Permit conditions:   Permit conditions:   SEE ATIACHED SITE SEECH   No expiration   No expirati			Site Improvements rec	Juired prior to Construction Author	rization Issuance:
Projected Daily Flow:   Mumber of Occupants:   max   Basement   Pres   No	Type of Structure:				
Number of Occupants:	Proposed Wastewater System Type:				
Basement   Tres   No   May be required based on final location and elevations of facilities   Permit valid for:   Five years   Premit conditions:   Permit valid for:   Permit valid for:   Five years   No   Public   Well Distance from well   Feet   Permit valid for:   Five years   No   Public   Public   Well Distance from well   Feet   Permit valid for:   Five years   No   Public   Permit valid for:   Five years   No   Public   Public   Public   Public   Public   Public   Public   Permit valid for:   Five years   Permit valid for:   Permit valid for:   Five years   Permit valid for:   Permit valid fo					
Pump Required: Tes No Hay be required based on final location and elevations of facilities   Permit conditions:		:max			
Type of Water Supply:   Community   Public   Well Distance from well   feet   Permit valid for:   Five years					
Permit conditions:   Date:   SEE ATTACHED SITE SKETCH				D 13. (	□ r:
Authorized State Agent:  The issuance of this permit by the Bealth Department in no way guarantees the issuance of other permits. The permit bulder is responsible for checking with appropriate generaling bodies in meeting their requirements. This is insplict neveronism of the laws and hules for Sevage Treatment and Dioposal and to conditions of this permit.    Construction Authorization   Required for Building Permit)	71				and the same of th
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Construction Authorization    Required for Building Permit	The issuance of this permit by the Health Department in no way guarantees	the issuance of other permits. The permi	t holder is responsible for chr		
Required for Building Permit	site is subject to revocation if the site plan, plat, or the intended use change	es. The Improvement Permit shall not be			
Required for Building Permit		Construction Au	thorization		
Trenche shall be installed in accordance with the attached system layout.    SUBDITION:   PROPERTY LOCATION:   SYTEM PROPERTY LOCATION:   SUBDITISION   LOT # SUBDITIS					
Subdivision   Lot #				into this permit and shall be met. System:	s shall be installed in accordance
Subdivision	ICHED TO: FORESTE POSSES	DDODEDT	LOCATION: 59-	7 Ome Ro	
Facility Type:   New   Expansion   Repair	BULL IO. TIDANCE TENCEE	TROFERI	ON -	, pove 10	10T #
Basement?   Yes   No   Basement Fixtures?   Yes   No	rate F - N	ונועוטסטנ ריי די	UN		LUI #
See note below, if applicable			sion Kepair		
Septic Tank Size   System of trenches   Septic Tank Size   System of trenches   Septic Tank Size   System of trenches   Septic Tank Size   System of State length of each trench   So   feet   Soil Cover: System of Cover: System of Soil Cover: System of Cover: System of Soil Cover: Sys				4	268 600
Installation Requirements/Conditions   Number of trenches   3				(Initial) Wastewater Flow:	360 GPD
Number of trenches   Septic Tank Size   Septic Tank Size Size Tank Size Size Tank Size Size Tank Size Size Size Tank Size Size Size Tank Size Size Size Size Size Size Size Size	(See note below, if applicable $\square$ )	S-15-6.	O (Panair)		
Septic Tank Size gallons Exact length of each trench 50 feet Trench Spacing: Feet on Center Pump Tank Size gallons Trenches shall be installed on contour at a Maximum Trench Depth of: 18 30 inches (Maximum soil cover shall not exceed (Trench bottoms shall be level to +/-1/4" 36" above the trench bottom)  Pump Requirements: ft. TDH vs. GPM inches below pipe Aggregate Depth: inches above pipe inches above pipe  Conditions: Aggregate Depth: 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 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					
Pump Tank Size				9	
Maximum Trench Depth of: No inches (Maximum soil cover shall not exceed (Trench bottoms shall be level to +/-1/4" 36" above the trench bottom) in all directions)  Pump Requirements: ft. TDH vs GPM inches below pipe  Conditions: inches below pipe  Aggregate Depth: inches above pipe  Conditions: 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: 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:		The second of the second			
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Construction Authorization Expiration Date: 262		Lens	Date:	2/17,	

UTE#	REPAIR
HIE#	LEANICE

Permit # 29149

## Harnett County Department of Public Health Site Sketch

	PROPERTY LOCATON:_	597	Dove	Ro	
ISSUED TO: FRANKE PGROEG	SUBDIVISION	~			LOT #
	COLIVER TOLKS	oone)	Date: 2	6/17	

