## HTE# 14-5-35195 Har t County Department of Public ealth

**Improvement Permit** 

28207

A I	ouilding permit cannot be issued with only an Improvement Permit	0.00		
ISSUED TO: Paul+ Paulette COX	PROPERTY LOCATION: 521937 BALLANCE SUBDIVISION	LOT #		
NEW $\square$ REPAIR $\square$ EXPANSION				
Type of Structure: I=x Dwm+	Site improvements required prior to	Construction Authorization issuance.		
Proposed Wastewater System Type: 25% 128000	Con			
Projected Daily Flow: GPD				
Number of bedrooms: 3 Number of Occupa	unts:			
Basement				
	ed based on final location and elevations of facilities			
Type of Water Supply:   Community Public	☐ Well Distance from well feet	Permit valid for:  Five years		
Permit conditions:		No expiration		
5	11-7-15	CEE ATTACHED SITE SPETCH		
Authorized State Agent:  Date: 1-7-15  SEE ATTACHED SITE SKETCH  The issuance of this permit by the Health Department in no way guarantees 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 use ch	anges. 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 conditions		Enter a resident and the second and the second and		
	Construction Authorization			
The construction and installation requirements of Bules 1950, 1952, 19	(Required for Building Permit) 54, .1955, .1956, .1957, .1958. and .1959 are incorporated by references into this permit a	and shall he met Systems shall he installed in accordance		
with the attached system layout.				
71,7146	PROPERTY LOCATION: <u>SC1437</u> Ball	11 - 21		
ISSUED TO: TAULT TAULETTE COX	PROPERTY LOCATION: 3/L1437 Pol	(And Kd)		
	SUBDIVISION	LOT #		
Facility Type: LEX DWM H	□ New □ Expansion □ Repair ures? □ Yes □ No			
Basement?  Yes  No Basement Fixt	ures? 🗆 Yes 🖃 No	21.6		
Type of Wastewater System** 25% NOVOUC	OZON System (Initial)	Wastewater Flow: 360 GPD		
(See note below, if applicable $\square$ )	1			
25% RADVO	Town Pretnest (Repair)			
Installation Requirements/Conditions	Number of trenches	G.		
Septic Tank Size 1000 gallons	Exact length of each trench 180 feet Trench Spa Trenches shall be installed on contour at a Soil Cover:	cing: Feet on Center		
Pump Tank Size gallons	Trenches shall be installed on contour at a Soil Cover:	inches		
0		m soil cover shall not exceed		
		ove the trench bottom)		
	in all directions)	,		
Pump Requirements:ft. TDH vs	GPM	inches below pipe		
Tulip Requirementsit. 1011 vs	Aggregate	Denth: 2 inches above nine		
Conditions:	77 7	Depth: 2 inches above pipe		
Collations.		menes total		
WITTER LINES (INC. URING IRRIGATION) MIST	AT LOCAL CROSS AND DATE OF CERTIC CVCTCM OR REPAIR ARE			
The second secon	BE 10FT. FROM ANY PART OF SEPTIC SYSTEM OR REPAIR ARE	A.		
NO UTILITIES ALLOWED IN INITIAL OR REPAIR D	RAIN FIELD AREA.			
** If applicable: / understand the system type specified	is different from the type specified on the application. I accept th	ne specifications of this permit.		
11 applicable. 1 understand the system type specimed	is different from the type specified on the appreciation i accept the	e specimeanous or any permit		
Owner/Legal Representative Signature:		Date:		
This Construction Authorization is subject to revocation if the site plan	olat, or the intended use changes. The Construction Authorization shall not be transferred wh	nen 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				
Autorial Care Acts - 5 Malate Paris				
Authorized State Agent:	Date:	1-7-18		
	Authorized State Agent:    Date:   1-7-15     Construction Authorization Expiration Date:   1-7-19			

## Harnett County Department of Public Health Site Sketch

PROPERTY LOCATON: 31,437 Balland RD			
ISSUED TO: Paul + Paulette Cox	SUBDIVISION	LOT #	
Authorized State Agent:	phant Date:	1-7-15	

