HTE# 06-50016261 Harment County Department of Public ...alth 23431

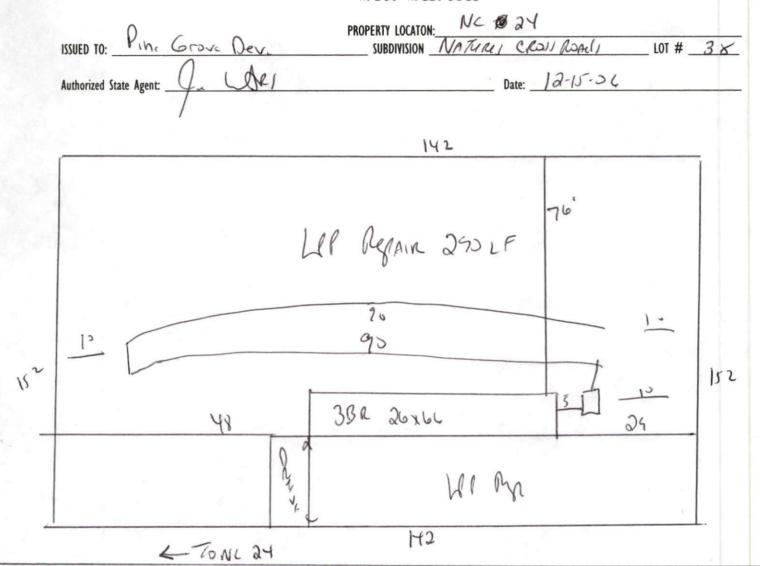
Improvement Permit

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: NO 24 NATURIS CROSS ROAdS SUBDIVISION EXPANSION Site Improvements required prior to Construction Authorization Issuance: Type of Structure: MH 26x66 3BR Proposed Wastewater System Type: 25% Red-ction System 560 Projected Daily Flow: Number of bedrooms: Number of Occupants: Basement Yes No ☐ May be required based on final location and elevations of facilities Pump Required: ☐Yes ✓ No Type of Water Supply: Community Public Well Distance from well 50 feet Permit valid for: A Five years

Permit conditions: 5 Final Plumbing Shallow - Meet on the for Final Plumbing No expiration STUB Out. Authorized State Agent:: (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 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 conditions of this permit. Construction Authorization (Required for Building Permit) The construction and installation requirements of Rules .1950, .1952, .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. PROPERTY LOCATION: NC24 ISSUED TO: Pine Grave Dev. Facility Type: MK 26×66 332 X New Expansion
Repair Basement Fixtures?
Yes Mo Wastewater Flow: 360 25% Reduction Type of Wastewater System** (Initial) (See note below, if applicable Installation Requirements/Conditions Exact length of each trench 1x 180 feet Septic Tank Size 1000 gallons Pump Tank Size gallons Trenches shall be installed on contour at a Maximum Trench Depth of: 18 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. ____ inches below pipe Aggregate Depth: inches above pipe inches total Conditions: I understand the system type specified is different from the type specified on the application. I accept the specifications of this permit. ** If applicable: Owner/Legal Representative Signature: 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 Authorized State Agent: Construction Authorization Expiration Date: 12-15-2

Permit # 23431

Harnett County Department of Public Health Site Sketch



Meet Onsite for Fival Layort
Meet Plumber onsite for Plumbing stub of
Enstall 1×180 d27% Reduction system At 18"
MAINTAIN All Set BACK)