HTE#08-5-19928

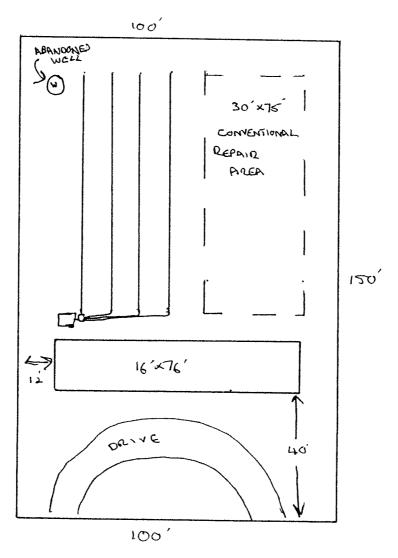
Harnett County Department of Public nealth 24738

Improvement Permit

A DUITUING PERMIT CANNOT DE ISSUED WI		
ISSUED TO: PARRICIA LYNNETIE STREET SUBDIVISION		
NEW REPAIR EXPANSION SUBDIVISION		Ь
Type of Structure: Man Home (16276)	Site Improvements required prior to Construction Authorization Issuance: EXISTING WELL NEEDS TO BE PROPERLY	
Proposed Wastewater System Type: Conventional	EXISTING HELL TOLLOS TO BE TEOFBLY	
Projected Daily Flow: 360 GPD	ABANDONED. NEW WELL AREN IS ON FRONT	
Number of bedrooms: 3 Number of Occupants: 6 max		
Basement TYes X No	OF PROPERTY WIN 6 OF FRONT PROPERTY LINE AN	٠,0
Pump Required: □Yes □ No ★ May be required based on final location and elev-	vations of facilities EUN THE VALOTH OF THE PROPERTY	<u>. D</u>
Type of Water Supply: ☐ Community ☐ Public 🔀 Well Distance from well _	50 feet Permit valid for: Five years	
Permit conditions:	■ No expiration	
	— In expiration	
Authorized State Agent:: Date:	5 15 08 SEE ATTACHED SITE SKETCH	
The issuance of this permit by the Health Department in no way guarantees the issuance of other permits. The permit	it 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 provision	ons of
the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.		
		
<u>Construction Au</u>	ıthorization	
(Required for Build		
The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .1957, .1958, and .1959 a		lance
with the attached system layout.	the incorporated by references into this period and shall be filed. Systems shall be instance in accordance	ance
Port Discourse		
	Y LOCATION: CEMETARCY LN	
SUBDIVISIO	ON FREDA MURCHISON LOT # 46	
Facility Type: Man. Home (16'x76') Mew Expans	ısion 🗆 Repair	
Basement? Yes No Basement Fixtures? Yes No	·	
Type of Wastewater System** Conventional	(Initial) Wastewater Flow: 360 GP	'D
(See note below, if applicable [])		-
CONVENTIONAL	(Repair)	
Installation Requirements/Conditions Number of trenches	_(,	
Septic Tank Size VOO gallons Exact length of each trench	75 feet Trench Spacing: 9 Feet on Center	
Pump Tank Size gallons Trenches shall be installed on co		
•		
Maximum Trench Depth of:	(
(Trench bottoms shall be level t	to +/-1/4" 36" above the trench bottom)	
in all directions)		
Pump Requirements:ft. TDH vs GPM	inches below	pipe
	Aggregate Depth: inches above	
Conditions:	$\mathcal{L}_{\mathcal{L}}}}}}}}}}$	
	mores	totai
** If applicable / understand the sustant true assisted in I'll to the i'll		
**If applicable: I understand the system type specified is different from the type specified	ed on the application. I accept the specifications of this permit.	
A		
Owner/Legal Representative Signature:	Date:	
This Construction Authorization is subject to revocation if the site plan, plat, or the intended use changes. The Construc	ction Authorization shall not be transferred when there is a change in ownership of the site. This	
Construction Authorization is subject to compliance with the previsions of the Laws and Rules for Sewage Treatment and	d Disposal and to the conditions of this permit. SEE ATTACHED SITE SKETC	CH
	I I	
Authorized State Agent:	Date: 9 30 08	
V	ization Expiration Date: 43013	
Construction Multivit	IZALION EXPITATION PAIC. 19011	

Harnett County Department of Public Health Site Sketch

	0	PROPERTY LOCATON: CEMETORY LN	
ISSUED TO: _	PATEICIA LYNNETTE	STREET SUBDIVISION FOEDA MURCHISON	LOT # 46
Authorized Sta	ate Agent:	OS(OLIVED TOLISONE) Date: 9 30 08	



CEMETARY LN