HTE#17-5-40620

# Harnett County Department of Public Health

29411

## Improvement Permit

A building permit cannot be issued wi	th only an Improvement Pe	ſmit	
PROPERTY LOCI	ATION: Docs (		
ISSUED TO: POUL LYON SUBDIVISION			LOT # 🖌
NEW X REPAIR E EXPANSION TYpe of Structure: MAN, HOME (28×70)	Site Improvements require	ed prior to Construction Author	
Proposed Wastewater System Type: 25%. REDUCTION STOREM	3 <del></del>		
Projected Daily Flow: GPD			
Number of bedrooms: Number of Occupants: max			
Basement $\Box$ Yes No Pump Required: $\Box$ Yes $\Box$ No $\Box$ May be required based on final location and elev.			
Pump Required: I'Yes Ko I May be required based on final location and elev-	ations of facilities		
Type of Water Supply:  Community Rublic  Well Distance from well		Permit valid for:	Five years
Permit conditions:			No expiration
ff and			
Authorized State Agent:: Queres Date:	2/23/17	SEE ATT	ACHED SITE SKETCH

The issuance of this permit by the Health Department in no way guarantees the issuance 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

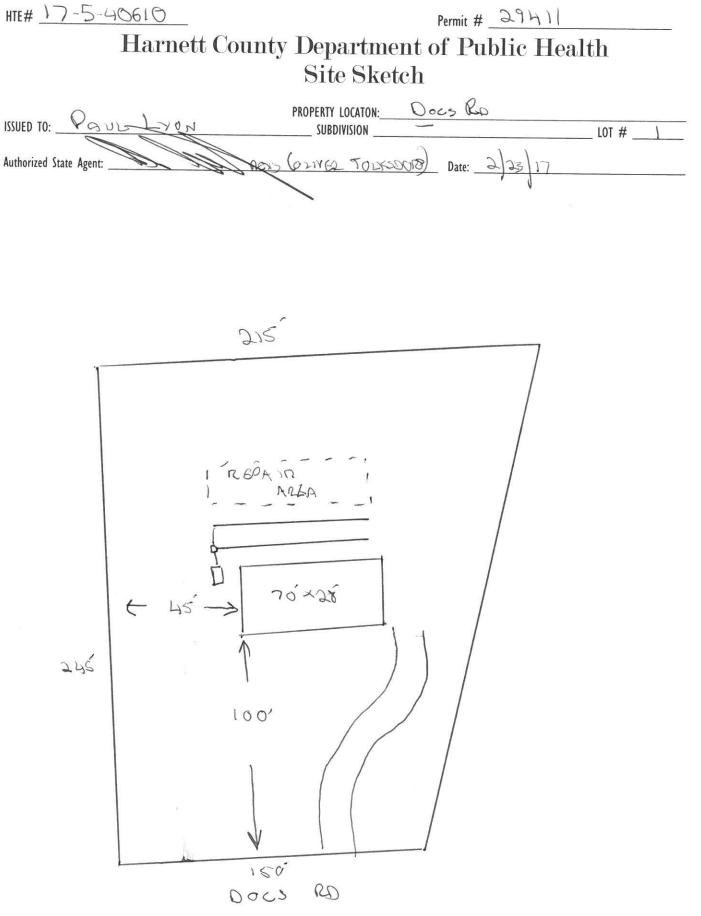
#### (Required for Building Permit)

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.

ISSUED TO: PRUZ LION	PROPERTY LOCATION:O	ocs Ro	
	SUBDIVISION	-	LOT # 1
Facility Type: MANHOME (28/17)	🕑 🖳 New 🗆 Expansion 🗆 Repair		
Basement? 🗆 Yes 🕞 No 🛛 Basement Fiz	xtures? 🗆 Yes 🛛 🔀 No		
Type of Wastewater System**	REDUCTION SUS.	(Initial) Wastewater Flow:	340 GPD
(See note below, if applicable 🗆)			
25%	RED, 573 (Repair)		
Installation Requirements/Conditions	Number of trenches		
Septic Tank Size 1000 gallons	Exact length of each trench $60$ feet	Trench Spacing: <u>1</u>	Feet on Center
Pump Tank Size gallons	Trenches shall be installed on contour at a	Soil Cover: 6-58 i	
2. Oliver and a state of the st	Maximum Trench Depth of: 18-30 inches	(Maximum soil cover shall r	
	(Trench bottoms shall be level to $+/-1/4$ "	36" above the trench bott	
	in all directions)		•)
Pump Requirements:ft. TDH vs			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 specific	rations 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	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: Date:	



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Divisi On-Si Owne: Addre Propo Locati Water Evalua	on of Enviro te Wastewate <b>for ON-5</b> r:	nmental H er Section SOIL/SI SITE WAS Applicant 3 & Applicant	TE EVALUAT STEWATER S t: Date Desig Prope	ION YSTEM Evaluated: gn Flow (.1949): 36 erty Recorded:	C → Property Si Vell □ Spring	🗌 Ot	her		
P R O F I .1940 L Landscape	Landscape			DRPHOLOGY 1941	.1942	OTHER PROFILE FACTO			-
E #	Position/ Slope %	Depth (In.)	.1941 Structure/ Texture	.1941 Consistence Mineralogy	Soil Wetness/ Color	.1943 Soil Depth (IN.)	.1956 Sapro Class	.1944 Restr Horiz	Profile Class & LTAR
١	US 0-2	0-48	63	vite silve					58
5		0-48	GS	VFR NJMP					28

Description	Initial System	Repair System	Other Factors (.1946): Site Classification (.1948):-5	
Available Space (.1945)		V	Evaluated By:	
System Type(s)	2510	960 543	Others Present:	
Site LTAR	15			