30119

HTE# 18.5-44094

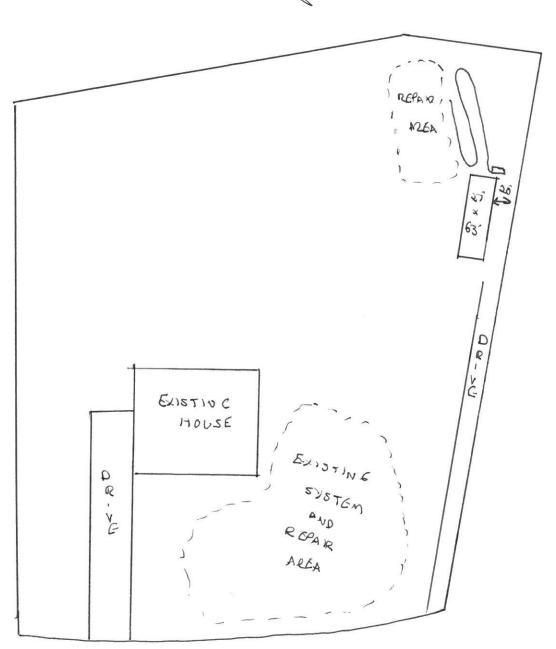
Harnett County Department of Public Health

Improvement Permit

A	building permit cannot be issued with only an Improvem		
ISSUED TO: JAMES GUY	PROPERTY LOCATION: OLIV		
	SUBDIVISION	LOT #	
NEW X REPAIR REPAIR			
Type of Structure: 111AN HOME CA	1,61)		
Proposed Wastewater System Type: 25% RED	UGION DYSIGM		
Projected Daily Flow: 360 GPD			
Number of bedrooms: > Number of Occup	pants:max		
Basement 🗆 Yes 🙀 No)		
	red 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	
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Authorized State Agent::	REHS Date: 6 11 18	SEE ATTACHED SITE SKETCH	
The issuance of this permit by the Health Department in no way guaran	stees the issuance of other permits. The permit holder is responsible for	checking with appropriate governing bodies in meeting their requirements. This	
		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 condition	s of this permit		
5-11 19.			
	Construction Authorization		
	(Required for Building Permit)		
The construction and installation requirements of Rules 1950, 1957, 19		ces into this permit and shall be met. Systems shall be installed in accordance	
with the attached system layout.	794, 1733, 1730, 1737, 1730. and 1737 are incorporated by referen	ces line this permit and shall be met. Systems shall be installed in accordance	
	ş		
ISSUED TO: _ JAMES GUY	PROPERTY LOCATION:	OLIVIA RO	
14	SUBDIVISION —	LOT #	
Facility Type: MAN HONE (27)2	New Expansion Repa		
Type of Wastewater System** 25% ROUCTIN SYSTEM (Initial) Wastewater Flow: 360 GPD			
(See note below, if applicable \square))		
	Repair)		
Installation Requirements/Conditions	Number of trenches		
Septic Tank Size 1000 gallons	Exact length of each trench 260 feet	Trench Spacing: Feet on Center	
Pump Tank Size gallons	Trenches shall be installed on contour at a	Soil Cover: Sinches	
8	Maximum Trench Depth of: inche	The state of the s	
		the state of the s	
	(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	
		Aggregate Depth: inches above pipe	
Conditions:		inches total	
300000000000000000000000000000000000000		Structure Value of the Control of th	
WATER LINES (INCLUDING IRRICATION) MILET R	E TOET EDOM ANY DADT OF CERTIC CYCTEM OF	D DEDAID ADEA	
WATER LINES (INCLUDING IRRIGATION) MUST B		K KEPAIK AKEA.	
NO UTILITIES ALLOWED IN INITIAL OR REPAIR D	RAIN FIELD AREA.		
** If applicable: I understand the system type specified	is different from the type specified on the applicate	on I account the energifications of this permit	
**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:	
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 con	ditions of this permit. SEE ATTACHED SITE SKETCH	
	M		
Authorized State Agent: Construction Authorization Expiration Date: 6 11 23			
Construction Aughanization Francisco Date: 11173			
Construction Authorization Expiration Date: 4 11/23			

Harnett County Department of Public Health Site Sketch

	PROPERTY LOCATON: OLIVIA RD	
ISSUED TO: LAMES LOW	SUBDIVISION	LOT #
Authorized State Agent:	RENS (OLIVER TOLKSDORE) Date:	111)18



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