HTE# 06-500-15635 Harnett County Department of Public nealth 23202

Improvement Permit

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: SUBDIVISION JHA EXPANSION Site Improvements required prior to Construction Authorization Issuance: Type of Structure: MH - 3BR - 28×66 Proposed Wastewater System Type: Conventional Projected Daily Flow: 360 Number of bedrooms: Number of Occupants: Basement Yes ☐ May be required based on final location and elevations of facilities Pump Required: Tes Five years Type of Water Supply:

Community ☑ Public ☐ Well Distance from well feet Permit valid for: Plumbing shallow- At ground level or higher Permit conditions: STUB OH ☐ No expiration 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.

ISSUED TO: Chick Pa Heason PROPERTY LOCATION: 1274 Facility Type: MH New Expansion Basement Fixtures?

Yes Basement? Yes No Type of Wastewater System** Conventional Wastewater Flow: 360 GPD (Initial) (See note below, if applicable) (30x 100) Installation Requirements/Conditions Exact length of each trench \(\sum_{\infty} \sigma_{\infty} \) feet Trench Spacing: Septic Tank Size 1000 gallons Pump Tank Size Trenches shall be installed on contour at a Maximum Trench Depth of: 18-20 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. ____ 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: 8/31/2011

Harnett County Department of Public Health Site Sketch

