HTE# 06-5-15806

## Harnest County Department of Public ...ealth 23304

Improvement Permit

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: SIZ 1553 LIVE OAK RI) SUBDIVISION TEmmy Voltason LOT # 3+4 Site Improvements required prior to Construction Authorization Issuance: Type of Structure: MH Proposed Wastewater System Type: 25% REDUCTION System Projected Daily Flow: 360 GPD Number of bedrooms: \_\_\_\_\_\_ Number of Occupants: \_\_\_\_\_ max Basement TYes Pump Required: Tes No May be required based on final location and elevations of facilities Five years Type of Water Supply: 

Community Public Well Distance from well \_\_\_\_\_\_\_ feet Permit valid for: ☐ No expiration Permit conditions: Date: 10-10-06 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: 5/553 / INCOAK ISSUED TO: DON JEWELL Facility Type: \_\_\_\_\_\_MH \_ SFD Expansion Basement? Yes No Basement Fixtures? 

Yes ☐ No Wastewater Flow: 360 GPD 25% REDUCTION (Initial) Type of Wastewater System\*\* (See note below, if applicable 

) 250/2 REDUCTION Installation Requirements/Conditions Exact length of each trench 80 feet Trench Spacing: 9 Feet on Center Soil Cover: 6 min inches Septic Tank Size \_\_\_\_\_\_ gallons Pump Tank Size \_\_\_\_\_ gallons Trenches shall be installed on contour at a Maximum Trench Depth of: 26 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. \_\_\_\_\_ GPM inches below pipe Aggregate Depth: Z inches above pipe inches total 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: James & MANLANT WERE Construction Authorization Expiration Date: 10-16-11

## Harnett County Department of Public Health Site Sketch

		PROPERTY LOCATON:	SR 1553 LEW	GOAK ROAD	
ISSUED TO:	DON JEWEII		TEnny J		LOT # 3+4
Authorized St	ate Agent:	Manhant on	Date:	10-10-06	

