## Harnett County Department of Public Health

24849

SEE ATTACHED SITE SKETCH

## **Improvement Permit**

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: 5K 1006 OID STAGE SUBDIVISION Site Improvements required prior to Construction Authorization Issuance: Type of Structure: \_\_\_\_ Proposed Wastewater System Type: 25% 128000000 Sys How Projected Daily Flow: 360 GPD Number of bedrooms: 3 Number of Occupants: 6 max Pump Required: Tes DNo May be required based on final location and elevations of facilities Five years Type of Water Supply: ☐ Community ☐ Public ☑ Well Distance from well SO'+ feet Permit valid for: Permit conditions: ☐ No expiration 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 ISSUED TO: JENN ASI (KE PROPERTY LOCATION: 52/006 010 STMGE SUBDIVISION \_\_\_\_\_ Repair Basement Fixtures? Yes No Basement? Yes No Basement Fixtures? Yes No
Type of Wastewater System\*\* 25% 1751) UTON Systa (Mouths) (Initial) Wastewater Flow: 360 GPD (See note below, if applicable 25% REDUCTION Sister (MANETER Repair) Installation Requirements/Conditions Septic Tank Size 1000 gallons Pump Tank Size \_ /000 Maximum Trench Depth of: 24-18 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 \*\*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: \_\_\_ 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

Authorized State Agent: \_ Date: 10-16-08 

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.

## Harnett County Department of Public Health Site Sketch

ISSUED TO: TENNIFER LEE	PROPERTY LOCATON: 577 106 C	OID STAGE TO	LOT #
Authorized State Agent: James & Manhas		Date:	
Manther System 72 Pressures  * 1006 ST + 1000 PT 72 Pressure  to 2"supply to 2-1/2" Sch 40 VAIVES  * Z > 150° 25% REDOCTION DRAFTER  * STEPDOWNS WILL BE NGEDO	Wes to BE	DEMONSTRATE	
Z88  BORIVE	25%	DETECH  DETECH	