HTE#<u>12-5-29583</u>

Harnett County Department of Public Health

Improvement Permit

27032

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: SVZ-1544 GUY RD ____ SUBDIVISION ___ Site Improvements required prior to Construction Authorization Issuance: Type of Structure: ____ & M /H Proposed Wastewater System Type: 25% TEDUCTON
Projected Daily Flow: 3 60 GPD Number of Occupants: 6 Number of bedrooms: ______ Basement TYes May be required based on final location and elevations of facilities ☐ No Pump Required:

Yes Five years Public Well Distance from well feet Permit valid for: Type of Water Supply:

Community ☐ No expiration Permit conditions: Janes EManhart Date: 8-28-12 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, .1950, .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. Basement Fixtures?

Yes (Initial) Wastewater Flow: 360 GPD Type of Wastewater System** 25% REDUCTON 54540 (See note below, if applicable) Number of *renches Installation Requirements/Conditions Exact length of each trench 100 Septic Tank Size 1005 gallons Pump Tank Size _____ gallons Trenches shall be installed on contour at a (Maximum soil cover shall not exceed Maximum Trench Depth of: 30718 inches (Trench bottoms shall be level to +/-1/4" 36" above the trench bottom) in all directions) Pump Requirements: ft. TDH vs. GPM 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 specifications of this permit. Owner/Legal Representative Signature: _____ SEE ATTACHED SITE SKETCH 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. es 5 Nanhan Date: 8-28-12 Authorized State Agent:

Construction Authorization Expiration Date: 8-28-17

Harnett County Department of Public Health Site Sketch

