HTE# 13-5-32611

Harnett County Department of Public Health

27768

Improvement Permit

A building permit cannot be issued with only an Improvement Permit					
PROPERTY LOCATION: OLD 42)					
ISSUED TO: JONALY DAVIS BLACK SUBDIVISION PEACH FARM LOT # 41					
NEW 🛛 REPAIR 🗆 EXPANSION 🗆 🔿 Site Improvements required prior to Construction Authorization Issuance:					
Type of Structure: MAN. Home (28°×70)					
Proposed Wastewater System Type: 25% REDUCTION SYSTEM					
Projected Daily Flow: <u>360</u> GPD					
Number of bedrooms: Number of Occupants: max					
Basement 🗆 Yes 🔀 No					
Pump Required: 🗆 Yes 🔀 No 🛛 🗋 May be required based on final location and elevations of facilities					
Type of Water Supply: 🗆 Community 💢 Public 🗆 Well Distance from well <u>\OO</u> feet Permit valid for: 🕰 Five years					
Permit conditions:					
Authorized State Agent:: SEE ATTACHED SITE SKETCH					
The issuance of this permit by the Health Department in no way guarantees the issuance of the 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 hall 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: JONAH DAVIS BLACK PROPERTY LOCATION: OLO 421					
SUBDIVISION PEACH FARM LOT # 4)					

Facility Type:	1 FROME 194	New 🗆 Expansion 🗋 Rep	air	
Basement? 🗆 Yes 🛛 😹	No Basement	Fixtures? I Yes X No FEDUCTION SYSTEM		
Type of Wastewater System**	25%	REDUCTION SYSTEM	(Initial) Wastewater Flow	r: <u>360 </u>
(See note below, if applicable		0		
	125%	REOUCTION (Repair)		
Installation Requirements/Condi	<u>tions</u>	Number of trenches	0	
Septic Tank Size 1000	gallons	Exact length of each trench 225 fee	t Trench Spacing: <u>9</u>	Feet on Center
Pump Tank Size	gallons	Trenches shall be installed on contour at a	Soil Cover: <u>G-12</u>	_ inches
		Maximum Trench Depth of: <u>18-24</u> inch	es (Maximum soil cover shal	l not exceed
		(Trench bottoms shall be level to $+/-1/4$ "	36" above the trench b	ottom)
		in all directions)		
Pump Requirements:	ft. TDH vs	GPM		inches below pipe
			Aggregate Depth:	inches above pipe
Conditions:				inches total

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.

