HTE#<u>14-5-33485</u>

Harnett County Department of Public Health

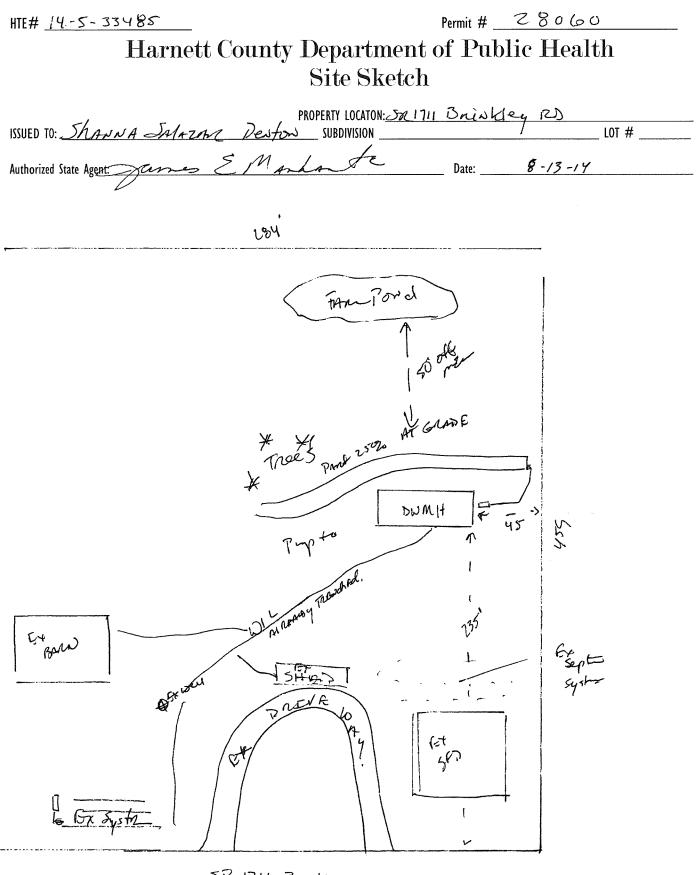
Improvement Permit

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A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: <u>JR1711</u> Brutwickey RD				
ISSUED TO: Shawn A Salazan Deston SUBDIVISION LOT #				
NEW \square REPAIR \square EXPANSION \square Site Improvements required prior to Construction Authorization Issuance:				
Type of Structure:DWm4				
Proposed Wastewater System Type: 25% NBDUTION				
Projected Daily Flow: GPD				
Number of bedrooms: Number of Occupants: max				
Basement \Box Yes \Box No				
Pump Required: 🗆 Yes 🗆 No 🔄 May be required based on final location and elevations of facilities				
Type of Water Supply: \Box Community \Box Public \Box Well Distance from well <u>100 r+-</u> feet Permit valid for: \Box Five years				
Permit conditions: No expiration				
Authorized State Agent: SEE ATTACHED SITE SKETCH				
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.				
start Start Dalla and Start Start Start				
ISSUED TO: _ Shawa A Sistly zon Denton PROPERTY LOCATION: SUJ11 Brinkley RD LOT #				
SUBDIVISION LOT #				
ISSUED TO: MANN A Sicher Denton PROPERTY LOCATION: SUBDIVISION Facility Type: During the colspan="2">Image: Colspan="2">PROPERTY LOCATION: SUBDIVISION Facility Type:				
Facility Type: U U P U H New L Expansion L Repair				

Basement? 🗋 Yes 🗹 No Baseme	nt Fixtures? 🗀 Yes 🛛 🖾 No	
Type of Wastewater System** 15% RGD	UDTON SYSTEM	(Initial) Wastewater Flow: <u>ろんつ</u> GPD
(See note below, if applicable 🗔)	- Fu- La	
ATGAAD	5 Conventional (2520 Rosphepair) < 54	Salso-
Installation_Requirements/Conditions	<u>S Convertionel 1252 RBE</u> Repair) Existen Number of trenches <u>2</u>	- · ·
Septic Tank Size <u>/000</u> gallons	Exact length of each trench $/20$ feet	Trench Spacing: Feet on Center
Pump Tank Size gallons	Trenches shall be installed on contour at a	Soil Cover: inches
	Maximum Trench Depth of: $26 - 518$ inches	(Maximum soil cover shall not exceed
	Maximum Trench Depth of: $26 - 318$ inches (Trench bottoms shall be level to $+/-1/4$) in all directions) MAX	36" above the trench bottom)
	in all directions) MAX	
Pump Requirements:ft. TDH vs		inches below pipe
• •		Aggregate Depth:2 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.

**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:	Date:		
This Construction Authorization is subject to revocation if the site plan, plat, or the intended use changes. The Construction Authorization shall not be	e 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 condition	ns of this permit. SEE ATTACHED SITE SKETCH		
Authorized State Agent: Date:	8-13-14 ate: <u>2-13-19</u>		



SR 1711 Browkley RD