HTE#15-5-35299121212 Harnett County Department of Public Health

28677

Improvement Permit

A building permit	t cannot be issued with only an improver			
ISSUED TO: MARTIN YOF		Thic Francis RA	LOT # 5	
133020 10. 7 (7.70) 2.10 1 4 0	SUBDIVISION	and the second s		
NEW ☑ REPAIR □ EXPANSION □	Site Improvement	required prior to Construction Authoriz	tation issuance:	
Type of Structure: Dwm4		Activity in the second		
Proposed Wastewater System Type: 252 newsorth	•			
Projected Daily Flow: 37e0 GPD				
Number of Occupants: 4	max			
Basement Yes No		10-16-11-10-11		
Pump Required: ☐Yes ☐ No ☐ May be required based on fi Type of Water Supply: ☐ Community ☐ Public ☐ Well ☐	inal location and elevations of facilities	Permit valid for:	Five years	
Permit conditions:			☐ No expiration	
Termit Conditions.		1 - 27 - 1 - 27 - 27 - 27 - 27 - 27 - 27	in expiration	
	7	4-44		
Authorized State Agentinas & Manhant	Date: 1-18-16	SEE ATTA	ACHED SITE SKETCH	
The issuance of this permit by the Health Department in no way guarantees the issuance of				
site is subject to revocation if the site plan, plat, or the intended use changes. The Improv	ement Permit shall not be affected by a change in	ownership of the site. This permit is subject to c	compliance with the provisions of	
the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.				
		5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Cor	<u>istruction Authorization</u>			
	(Required for Building Permit)			
The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956,	, ,	ences into this permit and shall be met. Systems	shall be installed in accordance	
with the attached system layout.				
ISSUED TO: Martin Yda	DRODERTY LOCATION.	15/7 1/6: 6: 2- 1	2 A	
1350ED 10: 1 (ANTIN TOCK	PROPERTY LOCATION: OZ	1562 Chic Fanes 10	LOT # 5	
	ZORDIAIZION		LOI # _5	
Facility Type: Dwn+		pair		
Basement? Yes No Basement Fixtures? Yes	s 🗷 No			
Type of Wastewater System** 25% 1283202200 5	system	(Initial) Wastewater Flow: _	360 GPD	
(See note below, if applicable \square)				
Pup to 25% 73	Arran (Repair)			
Installation Requirements/Conditions Number of	trenches			
Septic Tank Size 1000 gallons Exact length	n of each trench 100 fee	t Trench Spacing:	Feet on Center	
	all be installed on contour at a		nches	
	rench Depth of: <u>22-7/8</u> incl			
`		36" above the trench botto	om)	
in all direct	ions)	(-		
Pump Requirements:ft. TDH vs GPM			inches below pipe	
		Aggregate Depth:	inches above pipe	
Conditions:			Z inches total	
		TARIN PARTY OF THE		
WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FRO	M ANY PART OF SEPTIC SYSTEM	OR REPAIR AREA.		
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD				
**If applicable: I understand the system type specified is different to	rom the type specified on the applica	tion. I accept the specifications of the	his 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 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				
	//0			
Authorized State Agent: Date: 1-18-16 Construction Authorization Expiration Date: 1-18-21				
	Construction Authorization Evaluation	n Data: /- /5 - 2 /		

Harnett County Department of Public Health Site Sketch

	PROPERTY LOCATON: 50 1562 Chic	FINNES RD
ISSUED TO: Mantin YdE	SUBDIVISION	LOT #
Authorized State Agent:	Maxhanta Date:	1-19-16

* Probably I STEPONDA POND
WILL BE IN KAKL
LINE.

* Hold Tight to Back
Of Hone: As
POSSIBLE

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