	Improvement Permit
	A building permit cannot be issued with only an Improvement Permit
	PROPERTY LOCATION: 5×1562 Chic Even IS KS
ISSUED TO: MARTEN YDIG	SUBDIVISION LOT #
NEW 🕑 REPAIR 🗆 EXPA	ANSION Site Improvements required prior to Construction Authorization Issuance:
Type of Structure:	
Proposed Wastewater System Type: 25% 728	toverus
Projected Daily Flow: 360 GPD	· · · /
Number of bedrooms: <u>3</u> Number of (Basement 1 Yes 2 No	Occupants:max
	required based on final location and elevations of facilities
Type of Water Supply: Community Publ	
Permit conditions:	Existing Diversity No expirat
· · · ·	
Authorized State Agent: James 2 p	ashart Date: 1-30-15 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 requirem
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 pr
the Laws and Rules for Sewage Treatment and Disposal and to cor	nditions of this permit.
	Construction Authorization
	(Required for Building Permit)
	52, .1954, .1955, .1956, .1957, .1958. and .1959 are incorporated by references into this permit and shall be met. Systems shall be installed in ac
with the attached system layout.	
ISSUED TO: MANTIN YDE	PROPERTY LOCATION: Ja 562 Chic Prives RD
	SUBDIVISION LOT #
Facility Type:	New Expansion Repair
	$$ Fixtures? \Box Yes \Box No
	With System (Initial) Wastewater Flow: 360
(See note below, if applicable \Box)	
Pump to	25% 12BDV202 (Repair)
Installation Requirements/Conditions	Number of trenches 3
Septic Tank Size <u>1000</u> gallons	Exact length of each trench feet Trench Spacing: Feet on Center
Pump Tank Size gallons	Trenches shall be installed on contour at a Soil Cover: inches
1 mily 1 and 3120 Kanons	
	•
	(Trench bottoms shall be level to $+/-1/4$ " 36" above the trench bottom)
During Description (* TDP	in all directions)
Pump Requirements:ft. TDH vs	GPM inches belo
	Aggregate Depth: inches ab
Londitions:	
Conditions:	GPM Aggregate Depth: inches b Aggregate Depth: inches a in
WATER LINES (INCLUDING IRRIGATION) MU	ST BE 10FT. FROM ANY PART OF SEPTIC SYSTEM OR REPAIR AREA.
NO UTILITIES ALLOWED IN INITIAL OR REPAI	
NO UTILITIES ALLOWED IN INITIAL OR REPAI	entropy in different from the time monthed on the analysistics. I accent the second for the second this way it
	ified is different from the type specified on the application. I accept the specifications of this permit.
**If applicable: / understand the system type spec	
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**If applicable: / understand the system type spec Owner/Legal Representative Signature: This Construction Authorization is subject to revocation if the site p	Date:
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HTE# <u>15-5-35299</u>		Permit #	28216	
Harnett Cour	nty Department	of Publ	ic Health	
	Site Sketch	1		
m L. VAR	PROPERTY LOCATON: Sml		Brings RD	
ISSUED TO: MANTEN YDE				<u>s</u> ⁻
Authorized State Agen	Marhon to	Date:	1-30-15	
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		The WA	NO WATER a	TO POWER LEAKS
(+5F) DE OTSTERE	A.	·	IN Systa	on Power LENKS Bon on Repair
(+ 5 fr DE motister	0		AREA	•
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