HTE# 15-5-36844 Harrent County Department of Public County

28491

Improvement Permit

| A | building permit cannot be issued with only an Improvement Permit |
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| P. 1-10 37- | PROPERTY LOCATION: SUSTY DRY CREEK R) |
| / | SUBDIVISION N. V STISPARASINO LOT # 17 |
| NEW REPAIR C | ON Site Improvements required prior to Construction Authorization Issuance: |
| Type of Structure: | |
| Proposed Wastewater System Type: 2522 128120 | |
| Projected Daily Flow: 3CO GPD | |
| Number of bedrooms: Number of Occu | pants:max |
| Basement Yes No | in the state of th |
| | uired based on final location and elevations of facilities ☐ Well Distance from well feet Permit valid for: ☐ Five years |
| | well distance from well leet Permit valid for. |
| Permit conditions: | —————————————————————————————————————— |
| | 1 . / |
| Authorized State Agent: | Date: 9-1-15 SEE ATTACHED SITE SKETCH |
| | antees the issuance of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This |
| | 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 condition | ons of this permit |
| | |
| | Construction Authorization |
| | |
| The control of the latest and the la | (Required for Building Permit) |
| with the attached system layout. | 1954, .1955, .1956, .1957, .1958. and .1959 are incorporated by references into this permit and shall be met. Systems shall be installed in accordance |
| | |
| ISSUED TO: Paultua Flores | SUBDIVISION N.V. STEPHENSON LOT #17 |
| | SUBDIVISION N.V. STEPHENSON LOT # 17 |
| Facility Type: Dwn+ | ✓ New ☐ Expansion ☐ Repair |
| | xtures? Yes No |
| Type of Wastewater System** 25% 78 | Actures: La res La riv |
| | |
| (See note below, if applicable □) | Number of trenches Z (Repair) |
| Late Haring Demission and Conditions | New to a constant of the pair) |
| matanation requiremental continuous | number of deficies |
| Septic Tank Size gallons | Exact length of each trench _/ So feet Trench Spacing: Feet on Center Trenches shall be installed on contour at a soil Cover: inches |
| Pump Tank Size gallons | Trenches shall be installed on contour at a son cover inches |
| | Maximum Trench Depth of: 26->16 inches (Maximum soil cover shall not exceed |
| | (Trench bottoms shall be level to +/-1/4" 36" above the trench bottom) |
| | in all directions) |
| Pump Requirements:ft. TDH vs | , |
| ramp requirements. | Aggregate Depth: Z inches above pipe |
| Conditions: | |
| Conditions. | TE Indies 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 analisables / understand the system type specific | and is different from the time specified on the application I assent the specifications of this permit |
| ii applicable. I understand the system type specific | ed is different from the type specified on the application. I accept the specifications of this permit. |
| A | D |
| Owner/Legal Representative Signature: | 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. | |
| | 5 1 1 A |
| Authorized State Agent: | Date: 9-1-15 |
| | Date: 9-1-15 Construction Authorization Expiration Date: 9-1-20 |

HTE# 15-5-36844

Permit # ______ 2849 /

Harnett County Department of Public Health Site Sketch

