

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

ISSUED TO: True Homes, LLC
NEW REPAIR EXPANSION
Type of Structure: 4BR 40'x56' SFD
Proposed Wastewater System Type: 25% Reduction Sys.
Projected Daily Flow: 480 GPD
Number of bedrooms: 4 Number of Occupants: 8 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 NA feet
Permit conditions: _____

PROPERTY LOCATION: 49 Paige Stone Way (Chalybeate Springs Rd.)
SUBDIVISION Cross Link Place LOT # 70
Site Improvements required prior to Construction Authorization Issuance: _____

S/L 1441

Permit valid for: Five years
 No expiration

Authorized State Agent: [Signature] Date: 11/15/2018 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.

ISSUED TO: True Homes, LLC

PROPERTY LOCATION: 49 Paige Stone Way (Chalybeate Springs Rd.)
SUBDIVISION Cross Link Place LOT # 70

S/L 1441

Facility Type: 4BR 40'x56' SFD New Expansion Repair
Basement? Yes No Basement Fixtures? Yes No
Type of Wastewater System** 25% Reduction System (Initial) Wastewater Flow: 480 GPD
(See note below, if applicable)

Installation Requirements/Conditions

Number of trenches 4
Septic Tank Size 1000 gallons Exact length of each trench 75 feet Trench Spacing: 9 Feet on Center
Pump Tank Size _____ gallons Trenches shall be installed on contour at a Soil Cover: 6 inches
Maximum Trench Depth of: 18 inches (Maximum soil cover shall not exceed 36" above the trench bottom)
(Trench bottoms shall be level to +/-1/4" in all directions)
Pump Requirements: _____ ft. TDH vs. _____ GPM Aggregate Depth: NA inches below pipe
Conditions: _____ NA inches above pipe
NA 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 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

Authorized State Agent: [Signature] Date: 11/15/2018
ANDREW CURRIE Construction Authorization Expiration Date: 11/15/2023

HTE# SFD1810-0658

Permit # 30276

Harnett County Department of Public Health Site Sketch

ISSUED TO: True Homes, LLC PROPERTY LOCATION: 49 Paige Stone Way (Chalybeate Springs rd.) ⁵²¹⁴⁴¹
SUBDIVISION: Cross Link Place LOT # 70

Authorized State Agent: *[Signature]* Date: 11/15/2018
ANDREW CRAIG

