30302

HTE#_SFTD1812-0003

Harnett County Department of Public Health

Improvement Permit

A building permit cannot be issued with only an Improvement Permit
PROPERTY LOCATION: Constello Ct. (Rope Lake Road)
ISSUED TO: Signature Home olds SUBDIVISION DELITION Ests LOT # 5
NEW REPAIR EXPANSION Site Improvements required prior to Construction Authorization Issuance: Type of Structure: 48 × 53' 553
Proposed Wastewater System Type: 25% Neduction 515.
Projected Daily Flow:
Number of bedrooms: Number of Occupants: 8max
Basement Yes No
Pump Required: Yes No Hay be required based on final location and elevations of facilities
Type of Water Supply: Community Define Well Distance from well feet Permit valid for: Prive years
Permit conditions: No expiration
Authorized State Agent: Date: 12 18 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.
SSUED TO: Signature Home Blds PROPERTY LOCATION: Custallo ct. (Pape Luke Rd) SUBDIVISION Delillian Ests LOT # 5
Facility Type: 481 481 ×531 500 Defension Repair
Basement? Yes Basement Fixtures? Yes No
Type of Wastewater System** 25% neduction sys (Initial) Wastewater Flow: GPD
See note below, if applicable (minual) Wasternater From Graphics Gr
Pune to 25% reduction (Repair)
nstallation Requirements/Conditions Number of trenches 3
eptic Tank Size 1800 gallons Exact length of each trench 90 feet Trench Spacing: 7 Feet on Center
Pump Tank Size gallons
Maximum Trench Depth of: 26 > 18 inches (Maximum soil cover shall not exceed
in all directions) Tump Requirements:ft. TDH vs GPM inches below pipe
onditions: Deep (26Th) to shallow (18Th) install reguired Aggregate Depth: NA inches above pipe
/ATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM ANY PART OF SEPTIC SYSTEM OR REPAIR AREA. O 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.
wner/Legal Representative Signature:
is 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
onstruction 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.
uthorized State Agent:
ANDREW CONTIN Construction Authorization Expiration Date: 12/18/2023

Harnett County Department of Public Health Site Sketch

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	PROPERTY LOCATON:_	Costell	10 Cto (Po	pe Lai	WRA.	١
ISSUED TO: Signature Florie Blds.	SUBDIVISION	Delillian	Ests	LOT #	5_	
Authorized State Agent:	tim, 10	#5 Date:	12/18/20	8k		
ANDR	FED CURAIN					

* D-BOX EQUAL DISTRIBUTION REQUIRED

