Harnett County Department of Public Health Improvement Permit A building permit cannot be issued with only an Improvement Permit

			ROPERTY LOCATION: 620			112)	
ISSUED TO: Milton Built H	ome, LLC	5	UBDIVISION Milton Ente	erprises II	nc		LOT # 5
NEW REPA	IR EXPAI fd, 3 bedrooms 2.5 b	NSION aths	Site Impre	ovements re	quired prior to Constr	uction Authoria	ration Issuance:
Proposed Wastewater System							
Projected Daily Flow: 360	GPD		<u> </u>				
Number of bedrooms: 3	Number of O	ccupants: 6 ma	IX				
Basement Yes X N							
Pump Required: Yes	⊠ No	required based on final loca	tion and elevations of fac	cilities			
Type of Water Supply: (Permit	valid for:	★ Five years
Permit conditions:							☐ No expiration
			,				
Authorized State Agent:: <u></u>	160	Cum INH		403/			CHED SITE SKETCH
The issuance of this permit by the H site is subject to revocation if the si the Laws and Rules for Sewage Treat	te plan, plat, or the intended of	use changes. The Improvement Per					
		Construc	tion Authoriza	tion			
			ed for Building Permit				
The construction and installation requ	uirements of Rules 1950, 195				into this permit and shall	he met Sustams i	hall be installed in accordance
with the attached system layout.			so, and stryy are mediporated	of receives	me this perme and man	se mee. systems s	man be instance in accordance
ISSUED TO: Milton Built H	iome, LLC		PROPERTY LOCATION	: 620 Ch	ristian Light Road	(SR 1412)	
			SUBDIVISION Milton	Enterpris	ses Inc		LOT # <u>5</u>
Facility Type: 46x60 sfd, 3	3 bedrooms 2.5 bath	s New	☐ Expansion ☐	Repair			
] No				
Type of Wastewater System					(Initial) Wastev	vater Flow: 3	GPD GPD
See note below, if applicat					(milal) waster	uter 11011	010
see note below, if applicat		Reduction System	(Ronair)				
netallation Requirements/Co		Number of trenches	(Repair)				
Installation Requirements/Co					Transk Cassina 2		r C
Septic Tank Size 1000	0		h trench 60	feet	Trench Spacing: 3		
Pump Tank Size	gallons		stalled on contour at a		Soil Cover: 10		ches
			epth of: 22		(Maximum soil		
		And the second s	all be level to +/-1/4"		36" above the	trench botto	m)
		in all directions)					
oump Requirements:	ft. TDH vs	GPM				NA	inches below pipe
					Aggregate Depth:	NA	inches above pipe
Conditions: 15ft setback n	ninimum off existing	drainage ditch along pr	operty line			NA	inches total
VATER LINES (INCLUDIN	G IRRIGATION) MUS	T BE 10FT. FROM ANY	PART OF SEPTIC SYS	TEM OR	REPAIR AREA.		
O UTILITIES ÀLLOWED I							
**If applicable: 1 understand	the system type specif	fied is different from the	type specified on the	application	. I accept the specif	ications of th	is permit.
Owner/Legal Representative	Signature:				Date:		
his Construction Authorization is subj	ect to revocation if the site pl	an, plat, or the intended use chan	ges. The Construction Authoriza	tion shall not	be transferred when there is	a change in own	nership of the site. This
onstruction Authorization is subject t			-				TTACHED SITE SKETCH
	//						
Authorized State Agent: _	C/1/1/1	Tend h	tion Authorization Ex	Date	04/03/2	019	
10 To		0000	de Autorior P	Dale.	11/1/2	70016	
ANDIE	Dwini	Lonstruc	tion Authorization Ex	piration L	late: 04/03/	4024	

HTE# 5501903-00:	30
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Permit # NA

Harnett County Department of Public Health Site Sketch

SSUED TO: M; Iton Boilt Have, LC SUBDIVISION M: Iton Enterprises Fre. LOT # 5	2)
SSUED TO:	
uthorized State Agent:	
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