## Harnett County Department of Public Health

Improvement Permit

| PROPERTY LOCATION: 89 Vic MCKOC  | d.Ct., Coats  |
|--|---|
| ISSUED TO: MICRON INVESTMENTS SUBDIVISION COHIESTONLESTO   |   |
| NEW REPAIR EXPANSION Site Improvements required prior to Cor   | 101 71  |
| type of structure: OFD (O) X 10  |   |
| Proposed Wastewater System Type: 25% Reduction   |   |
| Projected Daily Flow: 30 GPD GPD   |   |
| Number of bedrooms: 3 Number of Occupants: max   |   |
| Basement Yes No  |   |
| Pump Required: Yes No May be required based on final location and elevations of facilities  Type of Water Supply: Community Deblic Well Distance from well feet Perm   | -   |
| Type of Water Supply: Community Dublic Well Distance from well feet Permit conditions:   | nit valid for: 🔀 Five years                           |
| Termit Conditions.   | No expiration   |
|  |   |
| Authorized State Agent:: Date: 9-13-19   | 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 site is subject to revocation if the site plan plat or the intended use changes. The Improvement Permits half are the officer of 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 p the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.  | ermit is subject to compliance with the provisions of |
|  |   |
| 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 pagmit and shall   | all he met Systems shall be installed in accordance   |
| The attached system layout.  |   |
| ISSUED TO: MICKON INVESTMENTS PROPERTY LOCATION: 89 VICINCL SUBDIVISION  | eccl Ct. Coats  |
| SUBDIVISION  | LOT #   |
| Facility Type: Style Company C |   |
| Basement? Yes No Basement Fixtures? Yes No   |   |
| Type of Wastewater System** 25% Reduction (Initial) Waste  | ewater Flow: 360 GPD                                  |
| (See note below, if applicable [])   | 010   |
| 25% Reduction (Repair)   |   |
| Installation Requirements/Conditions Number of trenches \infty   |   |
| Septic Tank Size 1000 gallons Exact length of each trench 75 feet Trench Spacing:  | Feet on Center  |
| Pump Tank Sizegallons  | 6 inches  |
| Maximum Trench Depth of: 18-24 inches (Maximum soil  | cover shall not exceed                                |
| /**  | e trench bottom)                                      |
| in all directions)   | s aronen zottom,                                      |
| Pump Requirements:ft. TDH vsGPM  | inches below pipe                                     |
| Aggregate Denth  | : inches above pipe                                   |
| Conditions:  | inches total  |
|  | ,menes total  |
| WATER 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.   |   |
|  |   |
| *Il applicable: I understand the system type specified is different from the type specified on the application. I accept the speci   | fications of this permit.                             |
| Juner/Legal Representative Communication   |   |
| Owner/Legal Representative Signature:  | :   |
| About to revocation in the site plan, plat, or the intended use changes. The Lonstruction 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.   | SEE ATTACHED SITE SKETCH                              |
| supposited that have the first of the second |   |
| authorized State Agent: Date: 9-13-19  |   |
| Brittany Addms Construction Authorization Expiration Date: 9-13-   | 2024  |

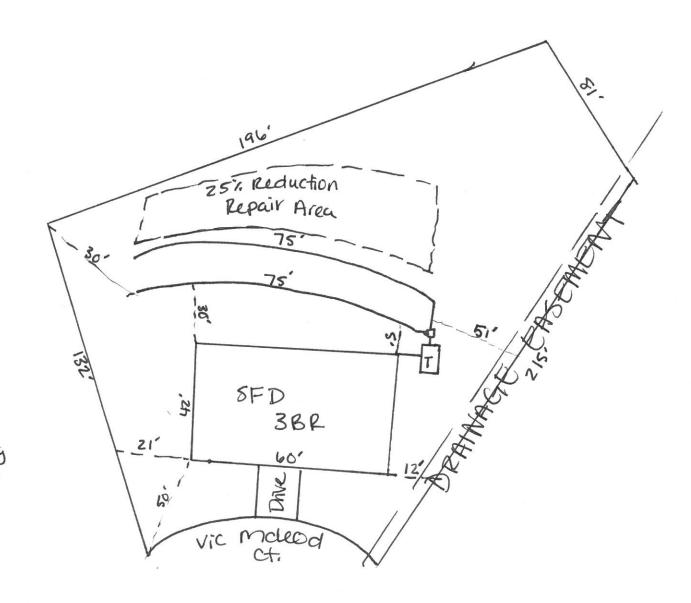
| HTE# | SFD | 1908-0015 |
|------|-----|-----------|
|------|-----|-----------|

| Permit | # |  |
|--------|---|--|
|        |   |  |

## Harnett County Department of Public Health Site Sketch

| issued to: Micron Investments          | PROPERTY LOCATION: 89 VIC Mcleocl Gt., Coats |
|--|--|
| ISSUED TO: TYTICACY ) THIVE THINK TYTS | subdivision <u>Cottlestane</u> Estates LOT # |
| Authorized State Agent: Both Colombia  | REHS-I Date: 9-13-19                         |
|  | Date:  |

This drawing is for illustrative purposes only. System installation must meet all pertinent laws, rules, and regulations.



\*Drawing NTS