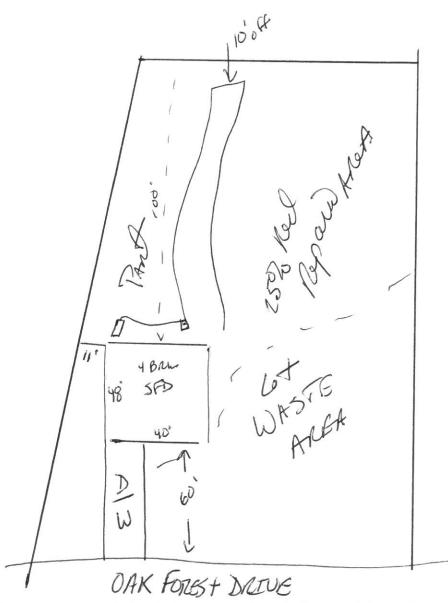
Harnett County Department of Public Health

Improvement Permit

A	building permit cannot be issued with only an Improvement	Permit 1 2 C	
CATTAN	PROPERTY LOCATION: 52 1320 M	in How welch (59 OAK FURGOT DX)	
ISSUED TO: GAIT CAND Deve	lopencot SUBDIVISION SUMments	LOT # 6Z	
NEW REPAIR EXPANSION	N Site Improvements req	uired prior to Construction Authorization Issuance:	
Type of Structure: SIPS			
Proposed Wastewater System Type: 2500 NSDE	(520)		
Projected Daily Flow: 480 GPD			
Number of bedrooms: Number of Occu	ants:8max		
Basement Yes No			
Pump Required: Yes No May be requ	red based on final location and elevations of facilities		
Type of Water Supply: Community Public	Well Distance from well feet	Permit valid for: Five years	
Permit conditions:		No expiration	
	1 15 ANS		
51	1 1 3 500		
Authorized State Agent:	Archand Date: 8-28-1	SEE ATTACHED SITE SKETCH	
The issuance of this permit by the Health Department in no way guara	stees the issuance of other permits. The permit holder is responsible for chec	king with appropriate governing bodies in meeting their requirements. This	
site is subject to revocation if the site plan, plat, or the intended use	hanges. The Improvement Permit shall not be affected by a change in owner	ship 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	s of this permit.		
	Construction Authorization		
71	(Required for Building Permit)		
with the attached system layout.	954, 1955, 1956, 1957, 1958, and 1959 are incorporated by references in	nto this permit and shall be met. Systems shall be installed in accordance	
AND THE WARD IN CORPORATION FLANGES IN THE PROPERTY.			
ISSUED TO: GAIT LAND D	eve Compa PROPERTY LOCATION SA 13	20 Millon Welch 59 JAK Forestion	
issues to.	CHAPTERIT ECCATION. STATE	1= 10T # 17	
	SUBUITISIUM SUTAME	101 # 62	
Facility Type:	New Expansion Repair		
	ures? Yes ANO		
Type of Wastewater System** _ Z5% 128	MOTON System	(Initial) Wastewater Flow: 480 GPD	
(See note below, if applicable)	/		
25% R	Brouce (Repair)		
Installation Requirements/Conditions	Number of trenches 2		
Septic Tank Size 1000 gallons	Exact length of each trench 80 feet	Trench Spacing: Feet on Center	
	6		
Pump Tank Sizegallons	Trenches shall be installed on contour at a	Soil Cover:inches	
	Maximum Trench Depth of: 20" 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	GPM	inches below pipe	
		Aggregate Depth: 2 inches above pipe	
Conditions:		/Z inches total	
Conditions.	***************************************	Inches total	
WATER LINES (INCLUDING IRRIGATION) MUST E	E 10FT. FROM ANY PART OF SEPTIC SYSTEM OR RI	EPAIR AREA.	
NO UTILITIES ALLOWED IN INITIAL OR REPAIR D	RAIN FIELD AREA.		
**If applicable: / 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, p	lat, or the intended use changes. The Construction Authorization shall not be	transferred when there is a change in ownership of the site. This	
	the Laws and Rules for Sewage Treatment and Disposal and to the condition		
	1 1-3-2015		
Authorized Court of the Court o			
Authorized State Agent: Date: 8-78-70 Construction Authorization Expiration Date: 8-78-75			
Construction Authorization Expiration Date: 8-78-25			

Harnett County Department of Public Health Site Sketch

Property Location: 50320 Millowelch 59 OAK Foxest Dr		
Issued To: GALT (AND Development Subdivision Summerlt)		Lot # 67
5 11 1 777718	te: _	8-28-20



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