App#	SFD2010-0083	
Poulsed		

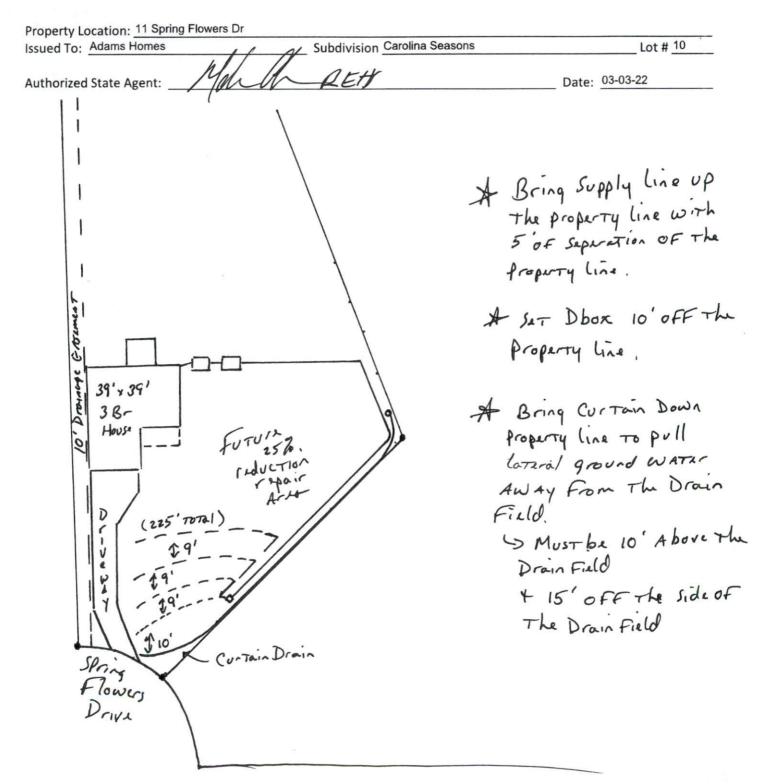
## Harnett County Department of Public Health

Improvement Permit

	uilding permit cannot be issued with only an improvement	Flances Dr. Comoron
11 )/	PROPERTY LOCATION: 11 Spring SUBDIVISION Carolina Seaso	Flowers Dr. Cameron
		ONS 101 # Controller Authorisation Impare:
NEW REPAIR TYPE OF STRUCTURE: 39'x39' SFL		ired prior to Construction Authorization Issuance:
Proposed Wastewater System Type: Pump to 25%		
Projected Daily Flow: 360 GPD	and industrial in the contract of the contract	
Number of bedrooms: 3 Number of Occupat	nts: 6max	
Basement (res No	-	
Pump Required Tolles No May be require	d based on final location and elevations of facilities	F2
Tune of Water Guarder Community & Public	Well Distance from well feet	Permit valid for: 🔀 five years
Permit conditions: System will repuire a fr above the start of the drainfield to	rench/interceptor drain to be instal o divert storm water from upslope	led
16 01		
Authorized State Agent: Mela M. REL	Date: 3-3-22	SEE ATTACHED SITE SKETCH
to the state of th	res the issuance of other permits. The permit holder is responsible for chec	fing with appropriate governing bodies in meeting their requirements. This
site is subject to revocation if the site plan, plat, or the intended use the	inges. 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 Bules for Sewage Treatment and Disposal and to conditions	er min permit	
	C A	
	Construction Authorization	
	(Required for Building Permit)	
The construction and installation requirements of Bules .1950, 1952, .195	4. 1955, 1956, 1957, 1958, and 1959 are incorporated by references it	into this permit and shall be met. Systems shall be installed in accordance
with the attached system layout.		
ISSUED TO: Adams Homes	PROPERTY LOCATION: 11 Sp	oring Flowers Dr. Cameron
ISSUED TO:		easons LOT # 10
Facility Type: 39'x39' SFD	Suburision Caronina Os	COOLIG
Basement? Yes No Basement Fixtu		(Initial) Wastewater Flow: 360 GPD
Type of Wastewater System** Pump to 25%	reduction	(Initial) Wastewater Flow: 360 GPD
(See note below, if applicable )		
Pump to 25	% reduction (Repair)	
Installation Requirements/Conditions	Number of trenches 1	
Septic Tank Size 1000 gallons	Exact length of each trench 225 feet	Trench Spacing: 9 Feet on Center
Pump Tank Size 1000 gallons	Trenches shall be installed on contour at a	Soil Cover: 6inches
	Maximum Trench Depth of: 18-26 inches	(Maximum soil cover shall not exceed
		36" above the trench bottom)
	in all directions)	
Pump Requirements:ft. TDH vs	GPM	inches below pipe
rump Requirements II. 101 73	_0///	Aggregate Depth: inches above pipe
Conditions: System will require a frence	blintercentor drain to be installed	
Conditions: System will require a french	divert storm water from unslone	of line
above the start of the drainlied to	divert storm water from upslope of	211112
WATER LINES (INCLUDING IRRIGATION) MUST BE	10FT, FROM ANY PART OF SEPTIC SYSTEM OR R	EPAIR AREA.
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DR	AIN FIELD AREA.	
		Lacrent the specifications of this permit
"Il applicable: I understand the system type specified	is different from the type specified on the application.	i accept the specimeanous of this period.
Owner/Legal Representative Signature:		Date:
This Construction Authorization is subject to revocation if the site plan pla	at or the intended use changes. The Construction Authorization shall not be	
	the Laws and Rules for Sewage Treatment and Disposal and to the condition	
1/1 1/		2 - 2 - 2 -
Authorized State Agent: All Me	LEHS Date:	3-3-2 <b>z</b> ate: 3-3-27
The same of the sa	Construction Authorization Expiration Da	ate: 3-3-27
	10 Ta Ta 4 Ta	

Application # SFD2010-0083 Revised

## Harnett County Department of Public Health Site Sketch



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