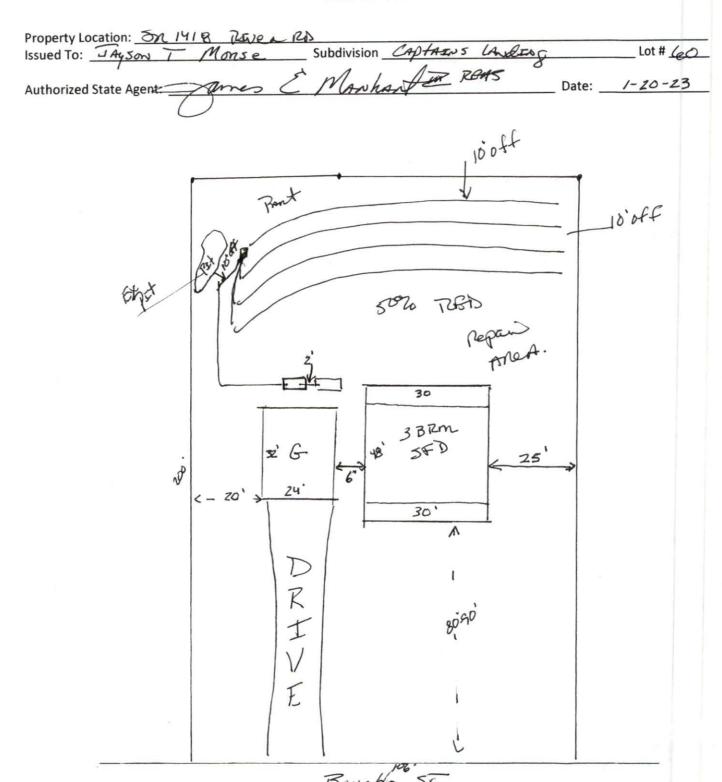
Harnett County Department of Public Health

Improvement Permit

| | PROPERTY LOCATION: SULY 18 Paven 72) |
|--|---|
| ISSUED TO: _ LAYSON / Monse | SUBDIVISION CAPARANS LANDERD LOT # 60 |
| NEW REPAIR EXPANSION | Site Improvements required prior to Construction Authorization Issuance: |
| Type of Structure: | |
| Proposed Wastewater System Type: 25% TOTOLOWN | |
| Projected Daily Flow: 360 GPD | |
| Number of bedrooms: 3 Number of Occupants: 6 | max |
| Basement Ves V No | |
| Pump Required: Tes No May be required based on final le | ocation and elevations of facilities |
| Type of Water Supply: Community Public Well Distan | ce from wellfeet Permit valid for: 🗹 Five years |
| Permit conditions: | No expiration |
| | 10.704 |
| Markand | Date: 1-20-23 SEE ATTACHED SITE SKETCH |
| Authorized State Agent: | Date: 1-20-23 SEE ATTACHED SITE SKETCH r 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 | Permits 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. | |
| | |
| Constr | uction Authorization |
| | quired for Building Permit) |
| | .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. | |
| ISSUED TO: JAYSON Monse | SUBDIVISION Captors and LOT # 60 Expansion Repair |
| | SUBDIVISION Captors Under LOT # 60 |
| Facility Type: New Rasement Fixtures? Yes | Expansion Repair |
| Basement? Tyes No Basement Fixtures? Tyes | □ No |
| Type of Wastewater System** 25% TOFISULTION | Systim (Initial) Wastewater Flow: 360 GPD |
| (See note below if applicable (1)) | |
| 500% RBISUCTU | (Repair) |
| Installation Requirements/Conditions Number of trend | hes 4 |
| | each trench 80 feet Trench Spacing: Feet on Center |
| | e installed on contour at a Soil Cover:inches |
| | Depth of: 22->18" inches (Maximum soil cover shall not exceed |
| | shall be level to +/-1/4" 36" above the trench bottom) |
| · Control of the cont | |
| in all directions) | inches below pipe |
| Pump Requirements:ft. TDH vsGPM | |
| | Aggregate Depth: 2 inches above pipe |
| Conditions: | inches total |
| | |
| WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM A | |
| NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD ARE | Α. |
| **If applicable: I 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: | |
| Owner/Legal Representative Signature: | |
| This 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 Construction 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 | |
| | 1 |
| Authorized State Agent: & March | truction Authorization Expiration Date: 1-20-28 |
| Cons | truction Authorization Expiration Date: 1-20-28 |

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.