Harnett County Department of Public Health

Improvement Permit

| A building permit cannot be issued w | |
|--|--|
| PROPERTY LOC | ATION-5c 1418 Paren CD |
| ISSUED TO FAMEL BUTCHESS CON DAY 17/15 SURDIVISION | Cantoria Concline 101# |
| ISSUED TO: FAMELY BUILDING CONGROUND SUBDIVISION NEW DI REPAIR DEXPANSION DE | City Programmers received origin to Construction Authorization Issuance. |
| | site improvements required prior to construction Additionzation issuance. |
| Type of Structure: SP | |
| Proposed Wastewater System Type: 25% TOSTOVETON | |
| Projected Daily Flow: 360 GPD | |
| Projected Daily Flow dru | |
| Number of bedrooms: Number of Occupants: max | |
| Basement Yes / Mo | |
| Pump Required: ☐ Yes ☐ No ☐ May be required based on final location and ele | vations of facilities |
| Type of Water Supply: Community Public Well Distance from well | feet Permit valid for: Five years |
| ,, – | ☐ No expiration |
| Permit conditions: | |
| 1-704 | |
| THE TURK | |
| Authorized State Agent: Date: | |
| The issuance of this permit by the Health Department in no way guarantees the issuance of other permits. The perm | nit 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 b | e 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. | |
| and dispersional control was supplied to the s | |
| C | al a disastina |
| Construction A | utnorization. |
| (Required for Buil | ding Permit) |
| Old her bell bell stell the stell bell the stell be | unity retinity |
| The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .1957, .1958. and .1959 | are incorporated by references find this perfill and shall be their systems shall be historically |
| with the attached system layout. | |
| C 1 3 10 1 11 11 200000 | TY LOCATION S. 1418 7-1- 05 |
| ISSUED TO: TANTLY DUELLEUS COMPANY IT LLC PROPER | IY LUCATION: OR 1710 ICENER 103 |
| ISSUED TO: Family Buthleus Company II LLC PROPER'S SUBDIVISE Facility Type: SPD New Expa | 10N Captures Landing LOT # 1 |
| Facility Turns | ncion |
| , // <u> </u> | install in the pair |
| Basement? Yes No Basement Fixtures? Yes No | 310 |
| Type of Wastewater System** 25% 76000000 | (Initial) Wastewater Flow: 360 GPD |
| | |
| (See note below, if applicable) | (0 - :) |
| Kepna Exempt | (Repair) |
| Installation Requirements/Conditions Number of trenches 3 | |
| Septic Tank Size 1000 gallons Exact length of each trench | 100 feet Trench Spacing: Feet on Center |
| | Gil Course G inches |
| Pump Tank Size 1000 gallons Trenches shall be installed on | control at a |
| Maximum Trench Depth of: | 18-20 inches (Maximum soil cover shall not exceed |
| (Trench bottoms shall be level | |
| | to 17-174 30 above the trenen bottom) |
| in all directions) | / |
| Pump Requirements:ft. TDH vsGPM | inches below pipe |
| Tump hedunements. | Aggregate Depth: |
| | 00 0 |
| Conditions: | |
| | |
| TO TOTAL VIOLENCE CONTRACTOR AND ADDRESS OF THE CONTRACTOR ADDRESS | CENTIC CVCTEM OD DEDMID ADEA |
| WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM ANY PART OF | SEPTIC SYSTEM OK KEPAIK AKEA. |
| NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD AREA. | |
| | |
| **If applicable: I understand the system type specified is different from the type specified | ified on the application. I accept the specifications of this permit. |
| | Salaria Salaria (M. P. Caraca Caraca) (C. Caraca) (|
| | D |
| Owner/Legal Representative Signature: | Date: |
| This Construction Authorization is subject to revocation if the site plan, plat, or the intended use changes. The Const | ruction 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 | |
| commenced to the contract of t | and Disposal and to the conditions of this permit. SEE ATTACHED SITE SKETCH |
| | |
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| Authorized State Agent: Ame Marchan Arm | ache |
| Authorized State Agent: Markon Authorized State Agent: Secretarian Authorized Authorized State Agents | |

Application # SPD 2310-

Harnett County Department of Public Health Site Sketch

| Property Location: SK 1418 Paver RD Issued To: Formal Burthage Company Subdivision CADTARN LANGEN | 0 | Lot#/ | |
|--|---------|----------|---|
| Issued To: Famely Building Company Subdivision Captain Christian | X | | Г |
| Authorized State Agent: Ames & Manhan Total 18 | Date: _ | 11-20-23 | |
| Authorized State / gent | | | |

