

Permit #

102375

PENDER COUNTY HEALTH DEPARTMENT

Map # _____

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Of 2

P.O. BOX 1209, BURGAW, NC 28425
PHONE: (910) 259-1233

Record # _____

IMPROVEMENT PERMIT

NO BUILDING PERMIT IS TO BE ISSUED WITH THIS PERMIT

Article 11 N.C. General Statues Chapter 130 {GS 130A-336}

THIS PERMIT IS SUBJECT TO REVOCATION IF SITE PLANS OR INTENDED USE CHANGES

Owner/Agent Ellen Cornette Applied Resource Management. P. C.

Date

9/11/07

Address P.O. Box 882 Hampstead NC 28443

Site Location _____

Subdivision Gray Stone

Lot No. 7

Section/Block One

System Type/Description 2a Conventional system

LTAR

.5

gpd/ft2

Daily Design Flow 480

Domestic Waste Water

Industrial Water

Trench Depth _____

Type Facility the Proposed Site is to serve Single Family Dwelling

Water Supply: Private Well

Community Well

Public

Other

Distance From All Wells 100FT

*****IN NO SITUATION LESS THAN 50'*****

Additional Information Prior to the construction Authorization issunance, the following conditions shall be met. A specific site

plan drawn to scale 1 inch =60 ft. or less. Plan must iinclude garage entrance, front or side, with driveway specification. Upon submittal

of site plan to office for revision, the proposal shall be stake on lot as site plan proposed. If there are any question please call the office

@ 910-259-1233 or 910-270-5000

SEE ATTACHED PAGES _____ OF _____ FOR SYSTEM LOCATION, ADDITIONAL SPECIFICATIONS AND ANY ADDITIONAL PERMIT CONDITIONS ARE A PART OF THIS IMPROVEMENT PERMIT AND OTHER IMPORTANT INSTALLATION INSTRUCTIONS.)

Signed Harry Lewis Rs Bs.

Date September 11, 2007

PCHD 105 (10-10-97)

Print Form