

HTE #: _____

HARNETT COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH
307 CORNELIUS HARNETT BOULEVARD
LILLINGTON, NC 27546

EXISTING SEPTIC SYSTEM INSPECTION

Name: Samantha McBryde Phone #: 919-356-2968

Address: 1501 Lawrence Rd Broadway NC 27305

Name of Mobile Home Park or S/D: _____

Name of Owner (if different): _____

Address of Owner (if different): _____

Property Location (State Road name and #): _____

Purpose of Inspection: Barn (21'x24')

The aforementioned site has been evaluated by the Harnett County Health Department Environmental Health Section. At the time of inspection, there appeared to be a septic system serving this site. If the system should malfunction, the owner is responsible for any necessary repairs.

THIS INSPECTION IS VOID IF:

1. the intended use of the septic system should change, and/or
2. the system should fail or malfunction, and/or
3. the owner or tenant of the property change, and/or
4. after six months

**BUILDING MUST BE 5' FROM ANY PART OF SEPTIC SYSTEM
DO NOT DRIVE OR PARK ON SEPTIC SYSTEM**

AUTHORIZATION OF EXISTING SYSTEM



Signature of Environmental Health Specialist

10/20/18

Date