OPERATIONS PERMIT 07-5-3119

Name: (owner)
TAX ID# Contractor:
Following are the specifications for the sewage disposal system on above captioned property.
Type of system: Conventional Other gallons Pump Tank: gallons
Size of tank: Septic Tank: gallons Pump Tank: gallons
Subsurface No. of exact length of each ditches ft. ditches ft. ditches in.
French Drain: Linear feet
PERMIT NO. 1899 Inspected by: Friedlist Environmental Health Specialist
AMP X

HARN COUNTY HEALTH DEPARTMI

IMPROVEMENT PERMIT

Nº 18909 O1-5-3119

Be it ordained by the Harnett County Board of Health as follows: Section III, Item B. "No Person shall begin construction of any building at which a septic tank system is to be used for disposal of sewage without first obtaining a written permit from the Harnett County Health Department."

Name: (owner) Dorothy Lester New Installation Septic Tank
Property Location: SR# 1233 Lloyd Struart Repairs Nitrification Lin
- Emerald Lane
Subdivision Lot #
Tax ID # Quadrant #
Number of Bedrooms Proposed: 2 (14x65) Lot Size: 6.01Ac
Number of Bedrooms Proposed: 2 (14x65) Lot Size: 6.01 A c Basement with Plumbing: Garage: Plane note Permit 15 Water Supply: Well Public Community of 3 BR home-
Water Supply: Well Public Community for 3 BR home-
Distance From Well: 75 min ft.
Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval.
Type of system:
Size of tank: Septic Tank: Oo gallons Pump Tank: gallons
Subsurface Drainage Field No. of depth of ditches of each ditch ft. ditches f
French Drain Required: Linear feet
This populities related to the Date:
This permit is subject to revocation if site plans or intended use change. Signed: Fryironmental Health Specialist
Environmental Health Specialist
31 8 765 282 110' David