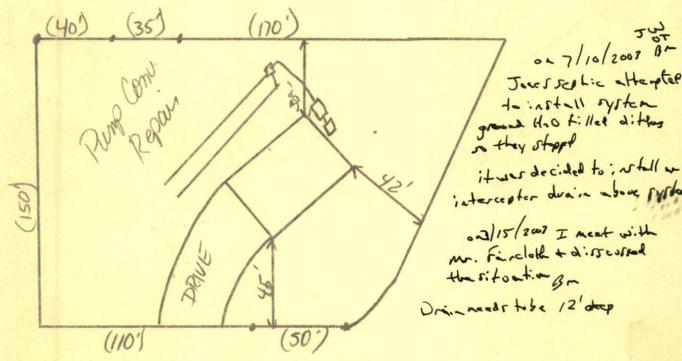
## HARNI COUNTY HEALTH DEPARTMENT

Nº18107

## 00-50000055

## IMPROVEMENT PERMIT

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." Mew Installation Septic Tank Name: (owner) Property Location: SR# Repairs Mitrification Line Subdivision Lot# Tax ID #\_\_\_ \_\_\_\_\_ Quadrant # \_\_\_\_\_ Number of Bedrooms Proposed: \_\_ Lot Size:\_ Basement with Plumbing: Garage: Water Supply: Well Public Public ☐ Community Distance From Well: Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Type of system: Conventional Other \_\_\_\_ Septic Tank: 1000 gallons Pump Tank: 1000 gallons Size of tank: Subsurface width of exact length depth of 19-7 Drainage Field of each ditch ditches ditches ! French Drain Required: \_\_\_\_\_ Linear feet /5 Feet Date: This permit is subject to revocation if site Signed: plans or intended use change. Environmental Health Specialist



## H TETT COUNTY HEALTH DEPA MENT AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department Improvement Permit #  $\frac{8000}{1000}$ . This authorization shall be valid for a period not to exceed five (5) years from the date of issuance. This authorization will be invalid if ownership, site plans, or intended use change.

Owner or Authorized Agent	
Name: RST Building	Telephone # <u>423-03/8</u>
Address: 6465 Barban Cakes	Rd. Fay NC
Property Location: SR # NC 24/87	Road Name NC 34/87
New Installation Repair Septic Tank	
Subdivision Richmond Work	
Number of Bedrooms Proposed: The Lot size	•
Basement With Plumbing With	
Water Supply: Well Public Minimu	m Well Setback:ft.
Type of System: Conventional Other	
Tank Volume: Septic Tank 1000 gallons Pum	p Chamber gallons
Number of fields Number of Lines per Field Length of lines 75 feeld Width of ditches ft. Depth of ditches 18-24 inches	
French Drain: Linear feet required Depth of gravel	
No wastewater system shall be covered or placed into use by any person until an inspection by the Harnett County Health Department has determined that the system has been installed according to the conditions of the improvement permit and that a valid operations permit has been issued.	
Authorized Agent for Harnett County Health Department  Name: Date: Sept 2000  (Revised 2/96) CNSTRCT. WPD	