

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."

Nitrification Line

STUB Out Plumbing Shallow
18" Ditch Depth Follow contours
Maintain All Required Setbacks
STAY 50' from any wells

Field

Ditch

Well

Pond

LPP

Setbacks: 100', 60', 50', 125'

Distances: 32', 36', 300', 100', 60', 50', 125'

Notes: STUB Out Plumbing Shallow, 18" Ditch Depth Follow contours, Maintain All Required Setbacks, STAY 50' from any wells

HARNETT COUNTY HEALTH DEPARTMENT
A AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department Improvement Permit # 12898. 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

Peggy Kelly

Name:

Telephone #

893-9678

Address:

Property Location: SR #

SR 1250

Read Name

New Installation

☒

Repair

Septic Tank

☒

Nitrification Lines

☒

Subdivision

Theodore Campbell

Lot #

6

Number of Bedrooms Proposed:

3

Lot size:

1.98 AC

Basement

With Plumbing

Without Plumbing

Water Supply: Well

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Public

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Minimum Well Setback:

50

100 ft away
ft. from septic
line

Type of System: Conventional

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Other

Tank Volume: Septic Tank

1000

gallons

Pump Chamber

gallons

Nitrification Field Specifications

Number of fields

1

Number of Lines per Field

4

Length of lines

100

Width of ditches

3

ft.

Depth of ditches

18

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:

G. L. W. W.

Date:

8-5-97