NETT COUNTY HEALTH DEPAI

ENT

Nº18079 6ld

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," Pine Grove Dev. New Installation Septic Tank Name: (owner) Property Location: Repairs Nitrification Line Subdivision Heather Lot# Tax ID #____ _____ Quadrant # ___ 28 x 44 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. Pump to Conventional Other_ Type of system: ☐ Conventional Septic Tank:/000 gallons Size of tank: Pump Tank: 1000 gallons Subsurface width of 2 No. of exact length depth of ft. ditches_ of each ditch 350 ft. ditches_ Drainage Field ditches French Drain Required: _ Linear feet 7-20-2000 This permit is subject to revocation if site Signed: _ plans or intended use change. Environmental Health Specialist 35R1141 -Meetonite Before Initally 18" MAX Otal Oplhi - (NT) Burg Supply min 380 3 Deep under Ditch MIL 10 Min Maintain All stBall 36 1104 10

100

170' Total

H. ETT COUNTY HEALTH DEPARTMENT AUTHORIZATION TO CON. RUCT

by Harnett County Health Department Improve	ment Permit # 18079 . This authorization
shall be valid for a period not to exceed five (5) y will be invalid if ownership, site plans, or intende	ears from the date of issuance. This authorization ed use change.
Owner or Authorized Agent In Grove	Dw. Jane STOVAl
Name:	Telephone # 499 - 1841
Address:	81
Property Location: SR#	Road Name
New Installation Repair Se	eptic Tank Nitrification Lines
Subdivision Heather Brook	Lot #
Number of Bedrooms Proposed: 3(21×44)	
Basement With Plumbing	Without Plumbing
Water Supply: Well Public	Minimum Well Setback: ft.
Type of System: Conventional Other	
Tank Volume: Septic Tank 1000 gallons	Pump Chamber gallons
Nitrification Field Specifications	
Number of fields Number of Lines per Fi	
Width of ditchesft. Depth of ditches	(\(\times \) 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.	
Name: Date:	
Name: Ja WAD	Date:
(Revised 2/96) CNSTRCT. WPD	