00-50000602

HARN T COUNTY HEALTH DEPARTME

Nº18148

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." New Installation Septic Tank Name: (owner) Property Location: SR# Repairs Nitrification Line Quadrant #_ Number of Bedrooms Proposed: Lot Size: Basement with Plumbing: Garage: Water Supply: 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 Size of tank: Septic Tank: gallons Pump Tank: _____ gallons Subsurface exact length No. of width of depth of Drainage Field ditches_ of each ditch ditches French Drain Required: _ __ Linear feet Date: This permit is subject to revocation if site Signed: plans or intended use change. Environmental Health Specialist (434' & maintain setbacks & markers & filter required.

AU1 HORIZATION TO CONS TRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department Improvement Permit # $\frac{18/48}{}$. 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 Agen				
Name: Jeff	rey Fink		Telephone #	814-0396
Address: 2447	Walher	Rd.	Linden	NC
Property Location: SR#	2047	R	oad Name	Hayes
New Installation	Repair Se	eptic Tank _	Nitrificati	on Lines
Subdivision	W. Fink	Estate	DLot#	43
Number of Bedrooms Propo	sed: Three	Lot size:		
Basement With	Plumbing	Withou	t Plumbing	
Water Supply: Well		-	Well Setback:	50 ft.
Type of System: Convention			_	
Tank Volume: Septic Tank	<u>/000</u> gallons	Pump	Chamber	gallons
Number of fields Number of Lines per Field Length of lines				
Width of ditches	it. Depth of ditches	18	inches	V
French Drain: Linear feet re	quired	Depth o	f 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 Harnet	0 1 1 1 1	Date:	\$7No	17000
Revised 2/96) CNSTRCT WPD				