#01-01-5-1388 No 16884

HARN COUNTY HEALTH DEPARTME

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." Name: (owner) RITA MITCHELL New Installation Septic Tank SR# 1403 Cokesbury Property Location: ☐ Repairs Nitrification Line Subdivision Quadrant # _____ Tax ID #___ Lot Size: 3.00 2 Acres Number of Bedrooms Proposed: ____ Basement with Plumbing: Garage: Water Supply: ☐ Well 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 Size of tank: Pump Tank: _____ gallons No. of 2 exact length of ditches sex of each ditch ft. ditches ft. Subsurface Drainage Field French Drain Required: _____ Linear feet This permit is subject to revocation if site plans or intended use change. Environmental Health Specialist 5etbacks * Contractor to MEET ON SITE PRIOR TO INSTAUATION! * NO SOIL DISTURBANKE Allowed 52 1403 All Leveling + Cleaning to BE DONE AFTER

HATTI COUNTY HEALTH DEPARTENT AUTI RIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department Improvement Permit # ________, 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 <u>RI ta Matchell</u>
Name: Telephone # <u>9/8 - 557 - 55//</u>
Address: 830 Cokeshung Rd F.V. N.C. 27526
Property Location: SR# 1403 Road Name Cokes Surg
New Installation Repair Septic Tank Nitrification Lines
Subdivision Lot #
Number of Bedrooms Proposed: Lot size:
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 Field Length of lines /50
Width of ditches 3 ft. Depth of ditches $18-27$ 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: games & Manhart 15 Date: 3-14-01
Revised 2/96) CNSTRCT WPD