HARN I COUNTY HEALTH DEPARTM

IMPROVEMENT PERMIT 01-5-3535

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."

from the Harnett County Health Department."		
Name: (owner) Mr. Grove Dev. Corp	- All All All Andrews and All Andrews and	Septic Tank
Property Location: SR# N(24/27	Repairs	Nitrification Line
Subdivision WOOD BRIDGE	Lot	#_38
Tax ID#	Quadrant #	
Number of Bedrooms Proposed: 307x76)	Lot Size: 5) Ac	
Basement with Plumbing: Garage:	STUB out Plumb	ing Stallow
Water Supply:  Well  Public  Communit	meet onsite	
Distance From Well: 50 ft. 00 not 0e	WE OF PARK ON SED	ti suit
rollowing 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: 1000 gallons		
Subsurface No. of Hexact length of each ditch 7	_ft. ditches _ 3 _ ft. di	itches 8 in.
French Drain Required: Linear feet	10 /	
Date: _	12-6-01 20 WARS	
This permit is subject to revocation if site	: Jo Waters	
plans or intended use change.	Environmental Hea	Ilth Specialist
1) !	410	Keep
		SYSTEM
ap (hpp.n	1 811	99' 18"De-1
	1111	MAY
7		/////X
42		
1 27776		
4 2 3BR	1 ' '	Tash
4 10 3BR		1
Min	BACI SO. 1	
	- Aua	1/03
180		
	4	

## HARNETT COUNTY HEALTH DEPAI **AUTHORIZATION TO CONSTRUCT**

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department, Improvement Permit $\# 12859$ . 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.		
Nome Conva Dev.		
Name Telephone #		
<u>C</u>		
Address		
N(24/27 Property Location SR#  Road Name		
Wood Bridge 38 3(27x76) 65741		
Subdivision Lot # Bedrooms Proposed Lot size		
TYPE OF SYSTEM		
New Installation [ ] Repair   Septic Tank   Nitrificiation Lines		
Conventional Other [] Basement [] With Plumbing [] Without Plumbing		
Water Supply: [ ] Well Public - Minimum Well Setback: 5 Ft.		
NITRIFICATION FIELD SPECIFICATIONS		
Number of fields # of lines per field Length of lines 75 Ft.		
7 12		
Width of ditches ft. Depth of ditches 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.		
(/2 ( A A A)		
Signature of Authorized Agent for Harnett County  Date		

Date