02-5-4209

HARNET OUNTY HEALTH DEPARTMEN'

Nº 19107

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."

from the Harnett County Health Department."	a tor disposar or sewage without first obtaining a written per in		
Name: (owner) FRANK ARNETTE			
Property Location: SR# Hwv27	Repairs Nitrification Line		
Subdivision FRANK ARNETTE	Lot #_ 3		
Tax ID #	Quadrant #		
Number of Bedrooms Proposed:3	Lot Size: 1.30 AC		
Basement with Plumbing: Gara	ige:		
Water Supply: Well Public Com	munity		
Distance From Well: ft.			
Following is the minimum specifications for sewage dis final approval. Type of system: Conventional Othe			
Size of tank: Septic Tank: gallons			
	width of 3 depth of 60 ft. ditches ft. ditches in.		
French Drain Required: Linear feet			
	Date: 3 28/02		
This permit is subject to revocation if site	Signed: Lethan		
plans or intended use change.	Environmental Health Specialist		
* MAINTAIN ALL SETBACKS	90' PRAWING NTS		
* RUN LINES ON CONTOUR			
	125		
	-15- 28,460		
	0-0-1		
	top 666'		
	REPAIR		

ARNETT COUNTY HEALTH DEPART NT ...JTHORIZATION TO CONST.__JCT

Authorization is hereby given to const Harnett County Health Department, I authorization shall be valid for a period This authorization will be invalid if own	mprovement Perod not to exceed	rmit # <u> 9 0 7</u> five (5) years from the da	. This ate of issuance.	
FRANK ARNETTE		910-483-59	מע"ו	
Name		910-473-59 Telephone	#	
PO BOX 558 SALEMB	uge NC			
TEYMH				
Property Location SR#	-	Road Name		
FRANK ARNETTE	3	# Bedrooms Proposed	1.30AC	
Subdivision	Lot #	# Bedrooms Proposed	Lot size	
	TYPE OF SYS	STEM		
New Installation [] Repair [Septic Tank Nitrification Lines				
[] Conventional Other Pump To CONVENTIONAL				
[] Basement [] With Plumbing [] Without Plumbing				
Water Supply: [] Well Public - Minimum Well Setback: 100 Ft.				
NITRIFICATION FIELD SPECIFICATIONS				
Number of fields # of lines per field Length of lines Ft.				
Width of ditches ft. Depth of ditches inches				
French Drain: Linear feet required Depth of gravel				
No wastewater system shall be inspection by the Harnett Count has been installed according to valid Open	y Health Depa the conditions	rtment has determin	ed that the system	
Signature of Authorized Agent for Harnett Count	ty	3] 98/02 Date		