## IMPROVEMENT PERMIT 02-5-4552

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) Pinc (ocove Dec. New Installation Septic Tank
Property Location: SR# Repairs Nitrification Line
Subdivision FARM @ 5 Ponds Lot # 5/
Tax ID # Quadrant #
Number of Bedrooms Proposed: 3(27×76) Lot Size: 1.88AC
Basement with Plumbing: Garage:
Water Supply:    Well    Public    Community
Distance From Well: 59 ft.
Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval.
Type of system: Conventional Other Kyp to Conventional
Size of tank: Septic Tank: gallons Pump Tank: gallons
Subsurface No. of exact length width of depth of ditches ft. ditches ft. ditches in.
French Drain Required: Linear feet
Date: $\frac{5-13-02}{1}$
This permit is subject to revocation if site plans or intended use change.  Signed: Environmental Health Specialist
Repaire Is Pritared med to LPP Dr To Sewer STSTEM - L. Pt stoton sof Rear of the Lot.
Maintain All sit Bach
Tally (20 tour)
Dad Dave on park on
Do not Drive on park on Septic system
78
Road
-5

## NETT COUNTY HEALTH DEPARTME **AUTHORIZATION TO CONSTRUCT**

Authorization is hereby given to construct a wastewater Harnett County Health Department, Improvement Perr	nit# //OSY This	
authorization shall be valid for a period not to exceed fit This authorization will be invalid if ownership, site plans,	or intended use change.	
Mre Grove Den	498-2204	
Name	498-2204 Telephone #	
Address		
1114		
Property Location SR#	Road Name	
	3(27176) 1.88m	
Subdivision Lot #	# Bedrooms Proposed Lot size	
TYPE OF SYSTEM		
New Installation [ ] Repair   Septic Tank   ] Nitrit	ication Lines	
[] Conventional Other Huy 75 Cnv,		
[ ] Basement [ ] With Plumbing [ ] Without Plumbing		
Water Supply: [ ] Well   Public - Minimum Well Setback:Ft.  NITRIFICATION FIELD SPECIFICATIONS		
Number of fields # of lines per field Length of lines Ft.		
Width of ditchesft. Depth of ditchesinches		
French Drain: Linear feet required Depth of grav	rel	
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.		
Signature of Authorized Agent for Harnett County	B-82	
- Similar pri radio izou rigant for Harriett County	Date	

Date