HARNE COUNTY HEALTH DEPARTMEN

IMPROVEMENT PERMIT

Nº 19472

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) The New Installation Septic Tank Property Location: SR#_ ☐ Repairs Nitrification Line Subdivision ____ Lot #_ Tax ID #_ Ouadrant #__ Number of Bedrooms Proposed: _ Basement with Plumbing: Garage: □ Community house location - must make Well Public Water Supply: Plot Plan match This Dermit Distance From Well: _ Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Other Junto Con. Type of system: ☐ Conventional Size of tank: Septic Tank: 4 Pump Tank: 1000 gallons Subsurface width of depth of ditches ft. ditches exact length _ft. ditches_ Drainage Field of each ditch French Drain Required: _ _ Linear feet This permit is subject to revocation if site plans or intended use change. Environmental Health Specialist MY DRIVE 368 Maintain All Set Backs - Oo not Drive orpach on Systic System - Oleax note Changes In house location

HA TT COUNTY HEALTH DEPARTMENT AUT DRIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department, Improvement Permit #			
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 or	vnership, site pi	lans, or intended use change.	
Più Gove Dev.		498.	2704
Name	Telephone #		
Address N(24/27			
Property Location SR#	Road Name		
WOOD Bridge	6	3 (27x60)	,70
Subdivision	Lot #	# Bedrooms Proposed	Lot size
	TWDE OF	CN/COPPIN #	
	TYPE OF	SYSTEM	
New Installation [] Repair Septic Tank [Nitrificiation Lines			
[] Conventional Other Wy to Conv. [] Basement [] With Plumbing [] Without Plumbing			
[] Conventional Other Way to Conv. [] Basement [] With Plumbing [] Without Plumbing			
Water Supply: [] Well [Public - Minimum Well Setback:			
Number of fields # of lines per field 3 Length of lines Ft.			
Width of ditches ft. Depth of ditches inches			
French Drain: Linear feet required Depth of gravel			
No wastewater system shall inspection by the Harnett Cour has been installed according to valid Op	nty Health Do the condition	epartment has determine	ed that the system
Signature of Authorized Agent for Harnett Co	unty	6 28.02 Date	