HAI IT COUNTY HEALTH DEPART 1 19486

IMPROVEMENT PERMIT 02-5-5518

med by the Harnett County Board of Health as follows: Section III, Item B. "No Person shall begin co

tion of any building at which a septic tank system is to be used for disposal of sewage without first obtaining a written from the Harnett County Health Department."	
Name: (owner) Todd 9 71WA HOLAR New Installation Septic Tank	
Property Location: SR# 128	Line
Subdivision Little River Plantation Lot # 101	
Tax ID # Quadrant #	144
Number of Bedrooms Proposed: 3(28x70 Lot Size: 10.94 AC	- 3
Basement with Plumbing: Garage:	
Water Supply:	
Distance From Well:ft.	
Following is the minimum specifications for sewage disposal system on above captioned property. Subject final approval.  Type of system: Other	to
Size of tank: Septic Tank: gallons Pump Tank: gallons	
Subsurface No. of ditches exact length width of depth of ditches ft. ditches ft. ditches in.	
French Drain Required: Linear feet	
Blue Flags Date: 7-11-02	
This permit is subject to revocation if site plans or intended use change.  Signed: Environmental Health Specialist	
Environmental Health Specialist	
T 100 KBM2	
75 382 F1A3	
DRIVE JOSEN PEPAIR	
128	
O R.VE	
Must Meet onste Before Installing - 15 Line To Be 18+0 24" The Rest 18" - Maintain Allset Back	
Do not DrivE DR PARK On septic System	

## H. TT COUNTY HEALTH DEPARTMEN AU'I DRIZATION TO CONSTRUCT

Harnett County Health Department, Improvement Permit # 1748 . This
Harnett County Health Department, Improvement Permit # 1/48
This authorization will be invalid if ownership, site plans, or intended use change.
Toda 9 Town Hollan 919-7746141
Name Telephone #
Address
112 1
Property Location SR# Road Name
Little Rour Plantation 101 3(28×70) 1094AC
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:Ft.  Septic Tank Pump Chamber
NITRIFICATION FIELD SPECIFICATIONS
Number of fields# of lines per field Length of lines Ft.
7
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.
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Jo W/1 /-11-52
Signature of Authorized Agent for Harnett County  Date