HARNETT COUNTY HEALTH DEPARTMENT

IMPR /EMENT PERMIT

12 13931

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) <u>Caystal Top</u> Property Location: SR# 1705	OID FAINGROUND		☑ Septic Tank ☑ Nitrification Line
Subdivision		Lot	#_2
Tax ID #		Quadrant #	
Number of Bedrooms Proposed:	3	ot Size: 7.8 Acre	
Basement with Plumbing:	Garage:		
Water Supply: Well Pu			
Distance From Well: 56'	ft.		
Following is the minimum specificati final approval.			
Type of system: Conventional			
Size of tank: Septic Tank:	1000 gallons Pr	ump Tank: gal	lons
Subsurface No. of 5 Drainage Field ditches 4	exact length 60 of each ditch 75 f	width of de t. ditches 3 ft. di	epth of tches 18-22 in.
French Drain Required:	Linear feet		
This permit is subject to revocation plans or intended use change.		7-15-02 Tenvironmental Heal	th Specialist
515 well 50.	Post-reporter 10 mil 10		

HA ITT COUNTY HEALTH DEPARTMEN AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department, Improvement Permit #____/373/_____. 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.

This authorization will be	invalid if	ownership, site	e plans, or in	tended use chang	e.	
Crystal Johns	(A)			910-	786-7856	
Name /				Telephon	286 - 285 6 e#	
507 W Johnson	57	DONN	N.C.	78334		
Address						
1705				OID	Frangoor	
Property Location SR#		Road Name				
		Z		3	7.8	
Subdivision		Lot #	# Bedi	rooms Proposed	Lot size	
[New Installation [] Re	epair [🌱 🤅	/	F SYSTEM Nitrificiation	on Lines		
Conventional Other		[]Base	ement []Wit	h Plumbing [] W	ithout Plumbing	
Water Supply: [] Well [Septic Tank					_	
	NITRII	FICATION FII	ELD SPECIFI	CATIONS		
Number of fields Z	# of lines [per field <u>4</u>	Length	of lines 75	Ft.	
Width of ditches ft. Depth of ditches inches						
French Drain: Linear feet re	quired	Dept	h of gravel			
No wastewater syst inspection by the Har has been installed acc	nett Cou cording t	nty Health	Departmentions of the	t has determin Improvement	ed that the system	
Signature of Authorized Agent for	MA	what to	eno.	7-15-02 Date		