03-5-7684

## HARN T COUNTY HEALTH DEPARTM

Nº 19375

## IMPROVEMENT PERMIT

Be it ordained by the Harnett County Board of Health as follows: Sect tion of any building at which a septic tank system is to be used for disposal of from the Harnett County Health Department."	of sewage without first obtaining a written permit
Name: (owner) Linke L. Stewart	New Installation Septic Tank
Property Location: SR# 2009 Prospect Chard la	Repairs Nitrification Line
Subdivision Fred Turtington	Lot # 3
Subdivision Fred Tartington  Tax ID #	Quadrant #
Number of Bedrooms Proposed: Lot S	ize: .55 Ac
Basement with Plumbing: Garage:	
Water Supply:  Well Public  Community	
Distance From Well: 50 m - ft.	
Following is the minimum specifications for sewage disposal system final approval.	
Type of system: Conventional Other	
Size of tank: Septic Tank: 1000 gallons Pump	_
Subsurface No. of exact length of each ditch 70 ft. d	vidth of depth of litches 3 ft. ditches 18 in.MAX
French Drain Required: Linear feet	1 /
This permit is subject to revocation if site plans or intended use change.  Signed:  **Maintain all rethecks*  **Ditches to be No Deeper than 18 inches	Environmental Health Specialist
208 MH 3Br 28'XCY'	211°

## HARNETT COUNTY HEALTH DEPARTMENT AU' ORIZATION TO CONSTRI Γ

by 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 ownership, site plans, or intended use change.	
Name Plant Name Plant Telephone#	
Address Longs Parkway Roleigh, N.C. 2 76/0	
Property Location SR#  Property Location SR#  Road Name	
Fred Turlington 3 Subdivision Lot # # Bedrooms Proposed Lot Size	
TYPE OF SYSTEM	
[ New Installation [ ] Repair [ ] Septic Tank [ ] Nitrification Lines	
[ ] Conventional [ ] Other	
[ ] Basement [ ] With Plumbing [ ] Without Plumbing	
Water Supply: [ ] Well [ Public Water Supply Minimum Well Setback: Ft.	
Septic Tank /000 gd Pump Chamber god	
NITIRFICATION FIELD SPECIFICATIONS	
Number of fields # of lines per field Length of lines Ft.	
Width of ditches ft. Depth of ditches /8 inches/4/2	
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.	
Signature of Authorized Agent for Harnett County of Harnett  Date	