HARN T COUNTY HEALTH DEPARTM

HTE 04-50010955

IMPROVEMENT PERMIT

21442

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) CLAYTON HOMES	New Installation	Septic Tank
Property Location: SR# 2048 BETHAL BARTIST RD	☐ Repairs	Nitrification Line
Subdivision WILLOW OAKS	Lot #	: 4
Tax ID #	Quadrant #	
Number of Bedrooms Proposed: 4 Lot Size	e: 1.10AC	-11 t
Basement with Plumbing: Garage:		
Water Supply:		
Distance From Well:ft.		
Following is the minimum specifications for sewage disposal syst to final approval.	tem on above caption	ed property. Subject
Type of system: ☐ Conventional ☐ Other 25% REOU	ICTION SYSTEM	
Size of tank: Septic Tank: 1000 gallons Pump T	Tank:gallons	
	width of	depth of
Drainage Field ditches 5 of each ditch 50 ft.	ditches 3 ft.	ditches 24 in.
French Drain Required:Linear feet	1 1	
Date:	15/35/61	
This permit is subject to revocation if site Signed:	Mishell of	RS (DLIVER TOLKSDORF)
plans or intended use change.	Environmental He	
	MAIMAIN *	ALL SETBACKS
	1	
	PRIOR T	TH ANY QUESTIONS
175		
32'	7'_	
32' × 76'		
	1	
SHALLOW D		
REPAIR I		
+		
ROAD EASEMENT		

HARNETT COUNTY DEPARTMENT OF PURIC HEALTH AUT DRIZATION TO CONSTRUCT

Harnett County Department of Public Health, Improvement Permit # 21442. 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.		
CLAYTON HOMES 424-8600		
Name Telephone #		
Address Address		
2048 BETHAL BAPTIST RO		
Property Location SR# Road Name		
WILLOW OAKS 4 Lot # Bedrooms Proposed Lot Size		
Subdivision Lot # # Bedrooms Proposed Lot Size		
TYPE OF SYSTEM		
New Installation [] Repair Septic Tank Nitrification Lines		
[] Conventional NOther 25% REDUCTION SYSTEM		
[] Basement [] With Plumbing [] Without Plumbing		
Water Supply: [] Well Public Water Supply Minimum Well Setback:Ft.		
Septic Tank VOOO gal Pump Chamber gal		
NITRIFICATION FIELD SPECIFICATIONS		
Number of fields # of lines per field Length of lines 50 Ft.		
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.		
Signature of Authorized Agent for Hamelt County Date		