HAI TT COUNTY HEALTH DEPART!

HTE OF 500 12437

IIVIPROVEMENT PERMIT

22144

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) Anthony Webster ______New Installation Septic Tank Repairs Nitrification Line Property Location: SR# Lot # 3 Subdivision Lineberger _____ Quadrant # _____ Tax ID # Number of Bedrooms Proposed: 3(28 x 63) Lot Size: 1.77 ac Basement with Plumbing: Garage: Public ☐ Community Water Supply: ☐ Well Distance From Well: 50 ft Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. NOther Kury to 25% Reduction SYTTEN Conventional Type of system: Septic Tank: 1000 gallons Pump Tank: 1000 gallons Size of tank: log width of exact length Subsurface No. of depth of of each ditch 300 ft. ditches Drainage Field ditches ditches French Drain Required: Linear feet 25% led cotion 545750 108 Date: 7-13-5 Signed: John This permit is subject to revocation if site Environmental Health Specialist plans or intended use change. Must Meet On site Before no Enstalling Maintain All Set Backs 148 260 EXISTINY Da.ve 60 PP 30R 21x65. 220

HARNETT COUNTY DEPARTMENT OF PUBLIC HEALTH AU IORIZATION TO CONST

Harnett County Department of Public Health, Improvement Permit # 22 4 4 . 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. And they Webster Name
Telephone #
Address
1200
Property Location SR#
Lineberger 3 3(28x60) 139A1 Subdivision Lot# #Bedrooms Proposed
Subdivision Lot # Bedrooms Proposed Lot Size
TYPE OF SYSTEM
New Installation [] Repair Septic Tank Nitrification Lines
[] Conventional MOther 25% Reduction SYSTEM
[] Basement [] With Plumbing [] Without Plumbing
Water Supply: [] Well Public Water Supply Minimum Well Setback: _50 Ft.
Septic Tank 1000 gal Pump Chamber 000 gal
NITRIFICATION FIELD SPECIFICATIONS
Number of fields # of lines per field Length of lines Ft.
Width of ditches OF 25% Reduction
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.
Jon West RS 7-17-05
Signature of Authorized Agent for Harnett County

Date