IMPROVEMENT PERMIT 22500

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 writte permit from the Harnett County Health Department."
Name: (owner) CHOO HOMES New Installation Septic Tank Repair
Property Location: SR# 2030 McLEAN CHAPEL CHRO Nitrification Line Expansion Dubdivision Country View Est.
Number of Bedrooms Proposed: 5 (360 ged) Lot Size: 1.01Ac
Basement with Plumbing: Garage:
Water Supply: Well Public Community Distance From Well: ft.
Following is the minimum specifications for sewage disposal system on above captioned property.
Subject to final approval.
Type of system: Conventional Other Pume To Conventional
Size of tank: Septic Tank: 1000 gallons Pump Tank: 1000 gallons
Subsurface No. of exact length width of depth of Drainage Field ditches 4 ft. of each ditch 75 ft. ditches 3 ft. ditches 18-22 in.
French Drain Required:Linear feet Date: 2 14/16
This permit is subject to revocation if site Date: 2 14/16 PERMIT EXPIRES 5 YEARS FROM ABOVE DATE
plans or intended use change.
Signed: LES COLIVER TOLKSDOE
SR2030 Environmental Health Specialist
* MAINTAIN ALL SETBACKS
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REPAIR E 23gen@ 117DH
* CALL WITH ANY QUESTIONS
PRIVATO INSTRUMITION
L176. 50115

HARNETT COUNTY DEPARTMENT OF PUBLIC HEALTH AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Department of Public Health, Improvement Permit #
Cmoo Cmoo Hames 860-8787
Name Telephone #
H209 BRAGE BLYD FAYEREYILLE NC 28303
Property Location SR# Property Location SR#
Road Name
Coursey View Est 1 3 (360 gs) 1.01 Ac Subdivision Lot # Bedrooms Proposed Lot Size
TYPE OF SYSTEM
New Installation [] Repair Septic Tank Nitrification Lines
[] Conventional Prother Pump To CONVENTIONAL
[] Basement [] With Plumbing [] Without Plumbing
Water Supply: [] Well Public Water Supply Minimum Well Setback: 100 Ft.
Septic Tank gal Pump Chamber gal gal
NITRIFICATION FIELD SPECIFICATIONS
Number of fields # of lines per field Length of lines 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 Harnest County Date