HAR TT COUNTY HEALTH DEPARTNTT

IM-ROVEMENT PERMIT 01-5-1942

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) LARRY Richard Johnson				New Installation	Septic Tank
Prop	erty Location:	SR#_ 1008	MMDR HILLS	Repairs	Nitrification Line
Subdivision Lot #					
Tax ID # Quadrant #					
Number of Bedrooms Proposed: 3 (28 x7 6) Lot Size: 2. 15 A C					
Basement with Plumbing: Garage:					
Water Supply:					
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					
Size	of tank:	Septic Tank:	gallons	Pump Tank: ga	allons
Subsurface No. of exact length of each ditch ft.					
French Drain Required: Linear feet					
Date: <u>05-10-01</u>					
This permit is subject to revocation if site plans or intended use change. Signed: Environmental Health Specialist					
Environmental Health Specialist					
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16	Meet onsite. 18" Ditch Depths Follow contains stub out				
	Mumbing shallow - DO NOT DRIVE DRARK on septic system				
	Place Ditch Along Property Line Above Septic system to Divert sufface				
	Plumbing	& Shallow	0 toh 0 00 10	rs Follow contain	eptic system

I NETT COUNTY HEALTH DEPA MENT AU'LHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department Improvement Permit # 18248 . 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. Owner or Authorized Agent harry Richard Johnson Name: ______ Telephone # ____893-3797 Property Location: SR # 308 Road Name New Installation Repair Septic Tank Nitrification Lines Subdivision Number of Bedrooms Proposed: 3(29x76) Lot size: 2.15Ac Basement _____ With Plumbing ____ Without Plumbing ____ Water Supply: Well _____ Public _____ Minimum Well Setback: _____ ft. Type of System: Conventional _____ Other _____ Tank Volume: Septic Tank 1000 gallons Pump Chamber _____ gallons **Nitrification Field Specifications** Number of fields _____ Number of Lines per Field ____ Length of lines _____ 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. Authorized Agent for Harnett County Health Department In WAR) Date: 05-10-01 Name: (Revised 2/96)cns/rct.wpd