04-5-10676R

HAR T COUNTY HEALTH DEPARTM

IMPROVEMENT PERMIT

Nº 19633

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."	H H.		
Name: (owner) Feve	,			
Property Location: S	Overhills	our wayer	☐ Repairs	Nitrification Line
Subdivision			Lot	#
Tax ID #			Quadrant #	
Number of Bedrooms l	Proposed: 4	Lot	Size: 2.41 initia	Lat-
Basement with Plumbing:		Garage:	15t. casement	7432.05 Ft2 Air - 12,750 F
Water Supply:	Vell Public	Community	2nd casement , Ry	Pair - 12,750 F
Distance From Well:	ft. 7	+		
Following is the minimu final approval.	um specifications for s		,	
Type of system: \square C	Conventional	Other Pung	1 to 25% Re	duction System
Size of tank: S	eptic Tank: _/000	gallons Pum	p Tank: 1000 gal	lons
Subsurface N Drainage Field di	No. of exaction of each exaction of each exaction of each exact ex	t length ach ditch /00 ft.	width of de ditches 3 ft. di	opth of tches <u>/8</u> in.
French Drain Required	: L		-/13/05 All 11 2	
Replaces Per	change. Let # 2143	Signed:	Environmental Heal	th Specialist · 29 aer
50'PTW -	€our way to ov	entille el		A STEP
mod line	D. A. S.	725	A Rependent of Oni;	aren Lotatel ot- ft. N. East giral Lot.

HARNETT COUNTY DEPARTMENT OF PU IC HEALTH AU__IORIZATION TO CONSTAUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Department of Public Health, Improvement Permit #				
Steve Lee (Ruth Gran Properly) 818-3309 Name Telephone #				
40 Pearl St. Stry Lake W. E. 28390				
1/20 Overfille Pd.				
Property Location SR# Road Name				
4 0 3 Au 72 0				
Subdivision Lot # Bedrooms Proposed Lot Size in cludes				
TYPE OF SYSTEM				
[-] New Installation [] Repair [-] Septic Tank [-] Nitrification Lines				
[] Conventional [JOther 25% Reduct. 2				
[] Basement [] With Plumbing [] Without Plumbing				
Water Supply: [] Well				
Septic Tank gal Pump Chamber gal gal				
NITRIFICATION FIELD SPECIFICATIONS				
Number of fields # of lines per field Length of lines / 0.0 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				

the conditions of the Improvement Permit and that a valid Operations Permit has been issued.