## **IMPROVEMENT PERMIT 22271**

construction of any building at which a septic tank system permit from the Harnett County Health Department."	is to be used for disposal of sewage without first obtaining a writte
Name: (owner) James Beasky	New Installation Septic Tank Repair
Property Location: SR# 1425 Hordee Rd.	Nitrification Line Expansion Lot # 4
Tax ID#	Quadrant #
Number of Bedrooms Proposed: 3 (360)	Quadrant #
Basement with Plumbing:  Garage:	
Water Supply:    Well    Public    Co	ommunity
Distance From Well: 50 km ft.	age disposal system on above captioned property.
Subject to final approval.	age disposar system on above captioned property.
Type of system: Conventional Other	
Size of tank: Septic Tank:/000 gallons	Pump Tank: gallons
Subsurface No. of exact length of each dit	h width of depth of ch 100 ft. ditches 3 ft. ditches in.
French Drain Required:Linear feet	Date: 11/8/2007
This permit is subject to revocation if site plans or intended use change.	PERMIT EXPIRES 5 YEARS FROM ABOVE DATE
* Maintanal retbecks	Signed Lynn Mysich. S.
* Runditches on contour	Environmental Health Specialist
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the Ridge	
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	SR 1425

## HARNETT COUNTY DEPARTMENT OF I SLIC 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 # 2227/ . 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.	
James Beesley Name Telephone #	
6825 Tec Jey Faranda Holly Springs, N. C. 27540 Address	
1425 Property Location SR# Road Name	
Road Haine	
RAMCLab 4 3 (360 gpd) 1.814c Subdivision Lot # Bedrooms Proposed Lot Size	
TYPE OF SYSTEM	
[ New Installation [ ] Repair [ Septic Tank   Nitrification Lines	
[ ] Conventional [ ] Other	
[ ] Basement [ ] With Plumbing [ ] Without Plumbing	
Water Supply: [ ] Well [ Public Water Supply Minimum Well Setback:Ft.	
Septic Tank gal Pump Chamber gal	
NITRIFICATION FIELD SPECIFICATIONS	
Number of fields # of lines per field # Length of lines Ft.	
Width of ditches ft. Depth of ditches /8-20_ 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.	
B mf. 05	
Signature of Authorized Agent for Harnett County  Date	