HTE# 06-5-1385417

IMPROVEMENT PERMIT 22374

construction of any building at which a septic tank system is to permit from the Harnett County/Health Department."	th as follows: Section III, Item B. "No person shall begin to be used for disposal of sewage without first obtaining a written
Name: (owner) Michael BASS	New Installation Septic Tank Repair
Property Location: SR# 1478 (GNDE SMETT) Subdivision Spring Meadow ACM	Nitrification Line Expansion Lot # 3
Number of Bedrooms Proposed : 3 3666	Quadrant #
Basement with Plumbing: Garage:	Lot Size.
Water Supply: Well Public Compositions From Well: 50' ft. Following is the minimum specifications for sewage Subject to final approval	e disposal system on above captioned property.
Type of system:	8% Reduction System
Size of tank: Septic Tank: gallons Pr	
Subsurface No. of exact length Drainage Field ditchesft. of each ditch	width of depth of ft. ditches 3 ft. ditches 24"in.
French Drain Required:Linear feet	Date: 2-2-06
This permit is subject to revocation if site plans or intended use change.	PERMIT EXPIRES 5 YEARS FROM ABOVE DATE
	Signed: CManhantens Environmental Health Specialist
TAKE NOTICE NOTICE TO Home SEZE Pur 15. 2598 Pur 15. 2598 Pur 15. 2598 The pain The pain	CHANGE EN LANGER Home SIZE ON WIll require Smallbox NEW Applecation PR S E

HARNE COUNTY DEPARTMENT O JBLIC 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 #	
Address Address	
Property Location SR# Road Name Spring Phaseless Acres 3 Subdivision Lot # Bedrooms Proposed Lot Size	
TYPE OF SYSTEM	
[New Installation [] Repair [] Septic Tank [] Nitrification Lines	
[] Conventional [] Other 2530nel sight	
[] Basement [] With Plumbing [] Without Plumbing	
Water Supply: Well Public Water Supply Minimum Well Setback: 50 Ft.	
Septic Tank gal Pump Chamber gal	
NITRIFICATION FIELD SPECIFICATIONS	
Number of fields # of lines per field 3 Length of lines 100 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 Harnett County Date	