#06-5-14779

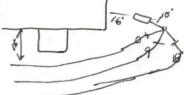
## HADNETT COUNTY HEALTH DEPARTMENT

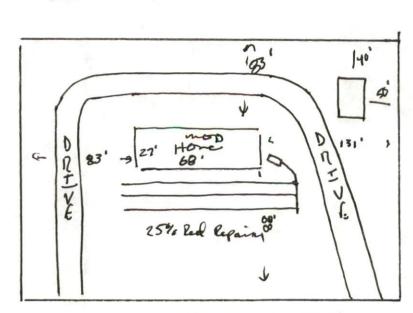
## ...IPROVEMENT PER T

Nº 14310

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."

from the Harnett County Health Department."		1
Name: (owner) DOYIE R BANDOUR	New Installation	Septic Tank
Property Location: SR# 2000 TANT ND	☐ Repairs	Nitrification Lin
	41.	
Subdivision Basheur Imel	Lo	t# TRITTAZ
Tax ID #	Quadrant #	
Number of Bedrooms Proposed: 3800 680 I	ot Size: 8zt 40	6
Basement with Plumbing: Garage:	1	
Water Supply:		
Distance From Well: ft.		
Following is the minimum specifications for sewage disposal sy final approval.		
Type of system: Conventional Other 25%	Robuction Byston	
Size of tank: Septic Tank: _/oo_ gallons P	ump Tank: ga	allons
Subsurface No. of exact length of each ditch of each ditch	width of ft. ditchesft. d	lepth of mar litches <u>26-18</u> in.
French Drain Required: Linear feet		
Date:	5-16-06	
This permit is subject to revocation if site Signed.	5-16-06	fons
plans or intended use change.	Environmental Hea	alth Specialist
76 0 18		





SROZOGO TART RD

## 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 #		
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.		
DOYIE 17 BARBOVA         510-857-8410           Name         Telephone #		
618 TANT RA WEST DUNN N.C. ZEZZY Address		
Property Location SR#  Road Name		
Road Name    Road Name   Road Name   Road Name		
TYPE OF SYSTEM		
[ New Installation [ ] Repair [ Septic Tank [ ] Nitrification Lines		
[] Conventional [JOther 76% Nadaction Eg 51		
[ ] 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 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		