## 20783

## HTE 64-5-898017

## **IMPROVEMENT PERMIT**

Be it ordained by the Hation of any building at which a sefrom the Harnett County Health	rnett County Board of Health as a ptic tank system is to be used for Department."	follows: Section III, Item disposal of sewage witho	B. "No Pe	rson shall begin constructioning a written permit
		New Ins	tallation	Sentic Tank
Name: (owner) <u>Gree</u> The Property Location: SR#_170	5 on Foregoonel	☐ Repairs	tarration	Nitrification Line
Subdivision Mclanb/ John Tax ID #_ Number of Bedrooms Propose	ട്ടത	4	Lot #	4
Tax ID #		Quadrant # _	1 5	
Number of Bedrooms Propose	ed: <i>3</i>	Lot Size:	47	
Basement with Plumbing:	Garage:			
Water Supply:		y		
Distance From Well:	<b>50'</b> ft.			
Following is the minimum s to final approval.	pecifications for sewage disp	oosal system on abov	e caption	ed property. Subject
Type of system:	ventional			
Size of tank: Sept	ic Tank://000 gallons	Pump Tank:	gallons	
Subsurface No. of Drainage Field ditches	exact length of each ditch 60	ft. width of ditches_3	ft.	depth of ditches 30→18 in.
French Drain Required:	<ul> <li>Linear feet</li> </ul>			
		Date: 4-6		
This permit is subject to rev	ocation if site	Signed: Jame	250	Andre Jacks
plans or intended use chang	e.	Environ	nental He	ealth Specialist
Set SEPTIC TANK OFF HOME ENOUGH to STANT TRENCHES AT 30" ID REFT MAX. (ANOW FOR GAPANSEON)	town see thom thom thom		The Take of the	of the property.
	SR-1705	OID Fairer	Omno	

04-5-898012

## HARNETT CO TY DEPARTMENT OF PUB HEALTH AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater Harnett County Department of Public Health, Improves authorization shall be valid for a period not to exceed for This authorization will be invalid if ownership, site play	ment Permit # <u>20783</u> . This ive (5) years from the date of issuance.				
Name  DOWN N.C. 128334  Address					
10. DUNN N.C. 128334 Address					
Property Location SR#	Road Name				
Mah form 4 3 Subdivision Lot # # Bedrooms F	Proposed Lot Size				
TYPE OF SYSTEM					
[ New Installation [ ] Repair [   Septic Tank [   Nitrification Lines					
[ ] Conventional [ ] Other					
[ ] Basement [ ] With Plumbing [ ] Without Plumb	ping				
Water Supply: [ ] Well [ Public Water Supply Minimum Well Setback: 50 Ft.					
Septic Tank/OOO gal Pump Chamber gal					
NITRIFICATION FIELD SPECIFICATIONS					
Number of fields # of lines per field 5 Length of lines 60 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.					
James & Mulipace	4-6-04				
Signature of Authorized Agent for Harnett County	Date				