HAI TT COUNTY HEALTH DEPART! V

HTE 05-5-12293

I.... PROVEMENT PERMIT

22034

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." Name: (owner) 3. J. NOZRES _____ New Installation Septic Tank Subdivision B. J Nonnis Lot # ✓ Basement with Plumbing: Garage: **Public** ☐ Well Water Supply: ☐ Community ft. Distance From Well: 50' Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Other Type of system: Conventional Pump Tank: gallons Size of tank: Septic Tank: 1000 gallons Subsurface No. of exact length width of depth of ditches 3 ft. Drainage Field ditches of each ditch 80 ft. ditches ZZ->18 in. French Drain Required: Linear feet Date: 6-16-05 Signed James & Manhan This permit is subject to revocation if site plans or intended use change. Environmental Health Specialist Part con repair # WATER 35

SR 1563 Bril Avery

#05-5-12293

HARNETT COUNTY DEPARTMENT OF PU IC HEALTH AU ... IORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Department of Public Health, Improvement Permit #
Name S. J. NORRIS S10-897-7294 Telephone # Address Address
Property Location SR# Bad Name Prod Name
Subdivision 2 2 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 22718 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 EManhanters
Signature of Authorized Agent for Harnett County Date