## HATTT COUNTY HEALTH DEPART TOTAL

Nº 16886

## INTO ROVEMENT PERMIT

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."		Da . T.
Name: (owner) Thomas Higgins III		
Property Location: SR# Hwy 401	Repairs	Nitrification Line
Subdivision Spence MIll Ind Pank	Lot	#_7
Tax ID #	Quadrant #	
Number of Bedrooms Proposed: 10 Employees L	ot Size: I Acre *	-
Basement with Plumbing: Garage:		
Water Supply:  Well Public  Community		
Distance From Well:ft.		
Following is the minimum specifications for sewage disposal sysfinal approval.	stem on above captioned	property. Subject to
Type of system: Conventional Other ELE	-222 LAY IWNS-	15-31
Size of tank: Septic Tank: 1000 gallons P	ump Tank: ga	llons
Subsurface No. of exact length of each ditch of each ditch	width of derivative distribution derivative derivative distribution derivative distribution derivative deriva	epth of itches 18-20 in.
French Drain Required: Linear feet		
Date:	3-20-01	1
This permit is subject to revocation if site plans or intended use change.  Signed:	James & MAN Environmental Hea	hart 18.
Plant of intended use change.	Environmental Hea	ith Specialist
	+ maintain al	Dethacks
	* Contractor to	MEETONSITE
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UNSUITABLE/ Text		
- 1717 Repair	C	
L Panh+	- DRIVE	
The Proposed Build In	1 LPP Rejain	>
Reserved	THE PERSON NAMED IN COLUMN NAM	

## #01-5-090 T 1338

## HATTETT COUNTY HEALTH DEPARTMENT AUTION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department Improvement Permit # /686 . 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.

Owner or Authorized Agent CENTER LE LCC		
Name: Thomas Hygrus III Conten II Telephone # 919-552-9522		
Address: 870 Ampont Rd Chape/Hall N.C. 27514		
Property Location: SR # 401 Road Name 401		
New Installation Repair Septic Tank Nitrification Lines		
Subdivision Spence MIII Lot # 7		
Number of Bedrooms Proposed: 10 Employ FES Lot size: / acce 7, -		
Basement With Plumbing Without Plumbing		
Water Supply: Well Public Minimum Well Setback: _50' ft.		
Type of System: Conventional Other EEE - 277 LAY		
Tank Volume: Septic Tank 1000 gallons Pump Chamber gallons		
Nitrification Field Specifications		
Number of fields Number of Lines per Field Length of lines		
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.		
Authorized Agent for Harnett County Health Department		
Name: James & Marshart Errs. Date: 3-20-01  (Revised 2/96)CNSTRCT.WPD		