HARN

COUNTY HEALTH DEPARTM

Nº 19179

HOZ-5-45121

IMPROVEMENT 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." New Installation Name: (owner) NEW BAKED BAPTEST CHUNCH Septic Tank SR# 46/N Property Location: Repairs Nitrification Line Subdivision ____Lot #_____ Quadrant # _____ Tax ID #_____ Number of Bedrooms Proposed: 40 Wildle 1 Takkeds Lot Size: 7.35 Basement with Plumbing: Garage: Community Distance From Well: ____ Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Other ____ Conventional Type of system: Size of tank: Pump Tank: 1500 gallons Septic Tank: 1500 gallons Subsurface No. of exact length depth of width of ditches 5 of each ditch 110 ft. ditches 3 ft. ditches 14-16 in. Drainage Field French Drain Required: _____ Linear feet This permit is subject to revocation if site Signed: _______Environmental Health Specialist plans or intended use change. Layout subject DUG EX Check Foller When Completion IS DONE

> OUT TO 5 Hwy 401N

HAF T COUNTY HEALTH DEPARTMENT AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department, Improvement Permit #
Name New Breed Baptest Chul 814-9202 - 822-1617 Name Telephone # 108 Wolfpornt Dr. Fryettevelle N.C. 78311 Address
108 Wolfpornt Dr. Frystlevelle N.C. 78311
Property Location SD#
Road Name
Subdivision 7.35
Subdivision Lot # # Bedrooms Proposed Lot size
TYPE OF SYSTEM
New Installation [] Repair [Septic Tank Nitrificiation Lines
[Conventional Other []Basement []With Plumbing [] Without Plumbing
Water Supply: [] Well [Public - Minimum Well Setback: Ft. Septic Tank Pump Chamber
Number of fields 2 # of lines per field 5 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