#01-5-3144

## HARNE COUNTY HEALTH DEPARTMEN

## 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."

from the Harne	tt County Heal	th Departm	ent."				
Name: (owne	er) JAMMI	E+ Micha	rel Mant	FACZ	_ New	Installation	Septic Tank
Property Loca	ntion: SR#_	1769	-		_ Repai	irs	Nitrification Line
Subdivision _	Rwenlas	od Est	-			Lot	#
Tax ID #					Quadr	ant #	
Number of Be	edrooms Prop	osed:	4		Lot Size:	.61	
Basement with	h Plumbing:		G	arage: [			
Water Supply:	: Well	Pub	lic 🔲 C	ommunit	y		
Distance Fron	n Well:	50.	ft.				
final approval	. /					t	property. Subject to
Size of tank:					Pump Tank: _		
Subsurface Drainage Field	No. o	f o	exact lengt of each dite	h 90	width of _ft. ditches _	3 ft. di	epth of itches 18-70 in.
French Drain	Required:	-	Linear f				
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This permit i plans or inter	THE RESIDENCE OF THE PARTY OF T	PUT SHIPS AND A STREET OF THE PROPERTY OF THE PARTY OF TH	II site	Signed:	Environ	EManha nmental Hea	lth Specialist
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WATER						* 1	1: - 1
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NEXT		210.			- 1	TO RUN	LINESWITH
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## RNETT COUNTY HEALTH DE RIMENT AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the sp	ecifications described
by Harnett County Health Department Improvement Permit # 18605	. 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				
Name: Telephone # 887-1722				
Address: 810 S 13th ST Fruin N.C. 28335				
Property Location: SR# 1769 Road Name 510 WERE				
New Installation Repair Septic Tank Nitrification Lines				
Subdivision Riverland Est Lot #_ 5				
Number of Bedrooms Proposed: 84 Lot size:				
Basement With Plumbing Without Plumbing				
Water Supply: Well Public Minimum Well Setback: ft.				
Type of System: Conventional Other				
Tank Volume: Septic Tank 1700 gallons Pump Chamber gallons				
Nitrification Field Specifications				
Number of fields Number of Lines per Field Length of lines SO				
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: Omes Emanhantens Date: 10-24-0) (Revised 2/96)CNSTRCT.WPD				
(Revised 2/96)cnstrct.wpd				