03-5-5547

HARN 'COUNTY HEALTH DEPARTME

Nº 1553

IMPROVEMENT PERMIT

tion of any	ordained by the Harnett County Board of Health as follows: Section I y building at which a septic tank system is to be used for disposal of se Harnett County Health Department."		
Name: ((owner) John A PARKER JR IN	lew Installation	☑ Septic Tank
Property	Location: SR# 1802 LANERd R	Repairs	■ Nitrification Line
Subdivis	sion	Lot	#
Tax ID #	‡Q	uadrant #	
Number	of Bedrooms Proposed: Lot Size:	1 ACRE	
Basemer	nt with Plumbing: Garage:		
Water Su	upply: Well Public Community		
Distance	From Well; / / Ob ft.		
Followin final app	g is the minimum specifications for sewage disposal system on proval.	above captioned	property. Subject to
Type of s	system: Conventional Other		
Size of ta	Daniel Land	nk: gal	llons
Subsurfa Drainage	No. of 3 exact length 133 width e Field ditches 4 of each ditch 100 ft. ditch	h of des des ft. di	epth of itches 18 max
French D	Drain Required: Linear feet		
OF SHIPPING STREET, SHIPPING	Crmit is subject to revocation if site intended use change. Date: Signed: En	vironmental Hea	har fee 128 Ith Specialist
	30 IROAD EASEMENT		AMEA
212.	ENNOVATINE SO	DRTYE	212
		er salting	

H ETT COUNTY HEALTH DEPARTME AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department, Improvement Permit # 15532 . 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. Tohn A Parken 910-892-7727

Name 910-892-7727

Telephone #

Address 1802 Property Location SR# Subdivision # Bedrooms Proposed Lot # TYPE OF SYSTEM New Installation [| Repair [| Septic Tank [| Nitrification Lines Conventional Other [] Basement [] With Plumbing [] Without Plumbing Water Supply: [] Well [] Public - Minimum Well Setback: 100 Ft. Septic Tank /000 Pump Chamber **NITRIFICATION FIELD SPECIFICATIONS** Number of fields 2 # of lines per field 5 Length of lines 135 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. 10-10-02 Date