#### HARN

### COUNTY HEALTH DEPARTME

## HTE 04-5-8820

## IMPROVEMENT PERMIT

20723

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) KELLEY JENKINS New Installation Septic Tank Property Location: SR# 1703 RED HILL CHURCH RD Repairs Nitrification Line Lot # \_\_\_\_\_ Subdivision Ouadrant # Tax ID # Lot Size: 3.67AC Number of Bedrooms Proposed: Garage: Basement with Plumbing: Public Public ☐ Well Water Supply: Community Distance From Well: ft. Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Other Pump To 25% REDUCTION SYSTEM Conventional Type of system: Size of tank: Septic Tank: yooo gallons Pump Tank: 1000 gallons Subsurface No. of exact length width of depth of of each ditch 75 ft. ditches 4 ditches 3 ft. Drainage Field ditches 12-15in. French Drain Required: Linear feet RS (OLIVER TOLKSDOEF) This permit is subject to revocation if site Signed: \_ plans or intended use change. Environmental Health Specialist CP+2 RIGHT OF WAY PROPOSED DRAWING \*MAINTAIN AND SETBACKS NTS moo HOUSE \* 25% REDUCTION SYSTEM REPAIR TO BE USED TO ALLOW AREA FOR POSSIBLE FUTURE HOUSE. \* 4 1/2" SCH 40 TAPS TO BE USED 532 148 PROPOSED TOTAL \* PUMP 319PNE12TOH PAD 2ന് 130 gallons/dose \* 2 Paessure HEAD 303 +CALL WITH ANY QUESTIONS PRIOR TO INSTALLATION \* MINIMUM OF 6" OF COVER NEEDED OVER ENTIRE DRAINFIELD ORIVE 5R 1703

# HARNETT CC | TY DEPARTMENT OF PUBL | HEALTH AUTHORIZATION TO CONSTRUCT

Harnett County Department of Public He authorization shall be valid for a period in <i>This authorization will be invalid if own</i>	ealth, Improvement Person to exceed five (5) years	mit #20723 . This ears from the date of issuance.
KELLEY JENKINS		892-1019
792 BRINKLEY RO DUNN		Telephone #
Address  1703 REO HILL CHURCH R		
Property Location SR#		Road Name
0.1 % : :	3	3.67AC
Subdivision Lot #	# Bedrooms Proposed	Lot Size
TYPE OF SYSTEM		
New Installation [ ] Repair Septic Tank Nitrification Lines		
[] Conventional [X] Other Pump To 25% REDUCTION SYSTEM		
[ ] Basement [ ] With Plumbing [ ] Without Plumbing		
Water Supply: [ ] Well Public Water Supply Minimum Well Setback: NOO Ft.		
Septic Tank gal	Pump Chamber	1000 gal
NITRIFICATION FIELD SPECIFICATIONS		
Number of fields # of lines p	per field 4 Le	ngth of linesFt.
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.		
s Allerical		3)24/02
Signature of Authorized Agent for Harnett County	<i>Y</i>	Date