## HARNI COUNTY HEALTH DEPARTME

## HTE 04-5-8830

## **IMPROVEMENT PERMIT**

Be it ordained by the Harnett County Board of Health as follows: So tion of any building at which a septic tank system is to be used for disposal of from the Harnett County Health Department."		_
Name: (owner) Richard Hayes	New Installation	Septic Tank
Property Location: SR# 1703 Red Hall CHURCH		Nitrification Line
Subdivision Walts Crossed;  Tax ID #  Number of Bedrooms Proposed:	Lot #	16
Tax ID #	Quadrant #	
	e: , 59 mene	
Basement with Plumbing: Garage:		
Water Supply: ☐ Well		
Distance From Well:ft.		
Following is the minimum specifications for sewage disposal sys to final approval.	tem on above caption	ed property. Subject
Type of system:		
Size of tank: Septic Tank: 1000 gallons Pump	Γank:gallons	
Subsurface No. of exact length of each ditch ft.		depth of ditches <b>ZZ<sup>-</sup>&gt;/8</b> in.
French Drain Required:Linear feet Date:	3 -8-04	
This permit is subject to revocation if site plans or intended use change.	Environmental He	alth Specialist
116		
Con rapper.		
	0.00	

## HARNETT CC TY DEPARTMENT OF PUB HEALTH AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Department of Public Health, Improvement Permit # 20753. 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.		
Name  S19-630-0408  Telephone #  70 Edwa John CT DUNN N.C. 28334		
70 Edna John CT DUNN N.C. 28334		
Property Location SR#  Red Hell Church  Road Name		
A Control of the Cont		
Subdivision Lot # Bedrooms Proposed Lot Size		
Subdivision Lot # Bedrooms Proposed Lot Size		
TYPE OF SYSTEM		
[ New Installation [ ] Repair [ Septic Tank [ Nitrification Lines		
[ ] Conventional [ ] Other		
[ ] Basement [ ] With Plumbing [ ] Without Plumbing		
Water Supply: [ ] Well [ ] Public Water Supply Minimum Well Setback:Ft.		
Septic Tank gal Pump Chamber gal		
NITRIFICATION FIELD SPECIFICATIONS		
Number of fields# of lines per field Length of lines Ft.		
Width of ditches ft. Depth of ditches inches		
French Drain: Linear feet required Depth of gravel		
No wastewater system shall be sovered as alread into a line of the same of the		
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.		
James & Mont tore 3-8-04		
Signature of Authorized Agent for Harnett County  Date		