HARNI — COUNTY HEALTH DEPARTME

HTE 04-5-1048112

IM. COVEMENT PERMIT

21372

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) Katherene STANTON New Installation Septic Tank Property Location: SR# 1727 SUGGS OFF EDNA TOHNOT Repairs Nitrification Line Subdivision Walts CROSSENS ____ Lot # __**9**___ ____ Quadrant # _____ Tax ID # Number of Bedrooms Proposed: 3 Lot Size: .63 Basement with Plumbing: Garage: Public Water Supply: Well ☐ Community Distance From Well: 50' ft. Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Conventional Tother Pump to Conventional Type of system: Size of tank: Septic Tank: 1000 gallons Pump Tank: 1000 gallons Subsurface No. of exact length width of No. of exact length width of ditches / of each ditch 480 ft. ditches 3 ft. ditches 12 in. Drainage Field French Drain Required: _____ Linear feet Date: 11-2-04 Signed James & Manhant ere This permit is subject to revocation if site DISTURBED Environmental Health Specialist plans or intended use change. *Contractor to WOODED -TOBE CIEARED DEMONSTRATE CON (NO PUMP) System Before Approval. 641164 0,10 6 of COVER WILL BE NEEDED HOME DR CO 11/34 EdNA JOHN CT

04-5-104812

HARNETT CCT VTY DEPARTMENT OF PUE CHEALTH AUT ORIZATION TO CONSTRUCT

Harnett County Department of Public Health, Improvement Permit #
Name Telephone #
Name Telephone # 151 Edna Tohn CT DUNN N.C. 28334 Address
1727 Property Location SR# Road Name
Walts Cross is 9 3 .63 Subdivision Lot # Bedrooms Proposed Lot Size
Subdivision J Lot # # Bedrooms Proposed Lot Size
TYPE OF SYSTEM
New Installation [] Repair [Septic Tank [] Nitrification Lines
[Tonventional [Tother Pumpto Convertions
[] Basement [] With Plumbing [] Without Plumbing
Water Supply: [Well Public Water Supply Minimum Well Setback:50Ft.
Septic Tank gal Pump Chamber gal
NITRIFICATION FIELD SPECIFICATIONS
Number of fields # of lines per field/ Length of lines 480 Ft.
Width of ditches ft. Depth of ditches /Z inches
French Drain: Linear feet required Depth of gravel
No vice to vice to the state of
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 & Manhantanes 11-2-04
Signature of Authorized Agent for Harnett County Date