HART TT COUNTY HEALTH DEPARTN T

HTE 05-5-1178412

IIVIPROVEMENT PERMIT

22177

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) Carolys Sugge Dorman New Installation Septic Tank Property Location: SR# 1703 RED 14-11 C4 120 Repairs Nitrification Line Subdivision CSD Lot# 6 Tax ID# Quadrant # 360 GPD Lot Size: Number of Bedrooms Proposed: Garage: Basement with Plumbing: 7 Public Water Supply: Well Community Distance From Well: Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Yother Purp to conventional Type of system: Conventional Size of tank: Septic Tank: 1006 gallons Pump Tank: 1000 gallons Subsurface No. of exact length width of of each ditch 350 ft. Drainage Field ditches ditches French Drain Required: Linear feet 8-4-05 Signed: CMarkent Environmental Health Specialist This permit is subject to revocation if site plans or intended use change. Terner Contractor to MEGT ON SITE Prion to INSTALLATED, The Prior to Plumbing Being STUBBEDOUT *Conventional system May Be Possible. 40 SRI703 RED HELL CHRD

HARNETT COUNTY DEPARTMENT OF PUT IC HEALTH AU ORIZATION TO CONST...CT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Department of Public Health, Improvement Permit # 22 177. This authorization shall be valid for a period pattern and 15 (5)
admortzation shall be valid for a period flot to exceed five (5) years from the date of issuance
This authorization will be invalid if ownership, site plans, or intended use change.
Name Tolorboro #
Name Relephone # 105 Pincussed DR Gruri N.C. 28338 Address
Address
1703 Personetty Location SD#
Road Name Road Name
Subdivision Lot # Bedrooms Proposed Lot Size
Subdivision Lot # Bedrooms Proposed Lot Size
TYPE OF SYSTEM
[New Installation [] Repair [] Septic Tank [] Nitrification Lines
[] Conventional [Tother Pup to Con-
[] 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 3570 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.
Signature of Authorized Agent for Harnett County
Signature of Authorized Agent for Harnett County Date