HARN T COUNTY HEALTH DEPARTMY T

HTE 03-5-1345R IMPROVEMENT PERMIT

21124

Be it ordained by the Harnett County Board of Health as follows: Se tion of any building at which a septic tank system is to be used for disposal of from the Harnett County Health Department."	f sewage without first obta	ining a written permit
Name: (owner) Atkno Place	New Installation	Septic Tank
Property Location: SR# 1448 Atking ld.	☐ Repairs	Nitrification Line
Subdivision Atkins ! lace	Lot #	21
Tax ID #	Quadrant #	
Number of Bedrooms Proposed: Lot Size	e:36Ac	
Basement with Plumbing: Garage:		
Water Supply:		
Distance From Well:ft.		
Following is the minimum specifications for sewage disposal syst to final approval.		ed property. Subject
Type of system: Conventional Other 25 % Red.	uction System	
Size of tank: Septic Tank: \(\frac{1000}{200} \) gallons Pump T	ank:gallons	
Subsurface No. of exact length Drainage Field ditches / of each ditch 210 ft.		depth of ditches 18-36 in.
French Drain Required:Linear feet Date:	1/10/2004 ,	18/2005
This permit is subject to revocation if site plans or intended use change. Signed:	Environmental He	alth Specialist
* Maintain all setbacks * Contractor to call prior		
* Contractor to call prior	2	
to installing with any		
	Se la	

HARNL COUNTY HEALTH DEPARTMENT AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department, Improvement Permit # 21124. 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.		
This authorization will be invalid if ownership, site plans, or intended use change. Atkarplace Name 10 10 10 10 10 10 10 10 10 10 10 10 10 1		
Name 919-639-7424		
72 Overlook Court Ang. er, N. C. 27501 Address		
1448		
Property Location SR# Road Name		
Atk of flee 21 3 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 [- Other 25% Reduct a System		
[] Basement [] With Plumbing [] Without Plumbing		
Water Supply: [] Well Public Water Supply Minimum Well Setback:Ft.		
Septic Tank / OOO god Pump Chamber god		
NITIRFICATION FIELD SPECIFICATIONS		
Number of 5.11		
Number of fields / # of lines per field / Length of lines 210 Ft.		
Width of ditches 3 ft. Depth of ditches 18-36 inches		
French Drain: Linear feet required Depth of gravel		
- Sharot Brayot		
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.		
Dun Milia R.S.		
Signature of Authorized Agent for Harnett County of Harnett Date		