HARN COUNTY HEALTH DEPARTME

20954

HTE 04-5-9971 R

IMPROVEMENT PERMIT

Be it ordained by the Harnett County Board of Health as follows: Section III, Item B. "No Person shation of any building at which a septic tank system is to be used for disposal of sewage without first obtaining from the Harnett County Health Department."	g a written permit
Name: (owner) LANU MUGHTS New Installation AS	Sentic Tank
Name: (owner)	Nitrification Line
Subdivision VTC Italls Lot # 50	6
Tax ID # Quadrant #	
Number of Bedrooms Proposed: 3 Lot Size: 26,259 55.5	
Basement with Plumbing: Garage:	
Water Supply:	
Distance From Well: 50' ft.	
Following is the minimum specifications for sewage disposal system on above captioned proto final approval.	
Type of system:	
Size of tank: Septic Tank:gallons	
Subsurface No. of exact length width of depth of each ditch 80 ft. ditches ft. ditches	th of hes ∠4 →18 in.
French Drain Required:Linear feet	
Date: 7-27-09	
This permit is subject to revocation if site plans or intended use change. Signed: Signed: Environmental Health Signed: Environmental Health Signed: Signed: Environmental Health Signed: Environmental Health Signed: Signed: Environmental Health Signed: Signed: Environmental Health Signed: Environmental Health Signed: Signed: Environmental Health Signed: Environm	Specialist Specialist
PUP CORPOREDA 34'HOME G 14' TIO' 86PL DEIMAN CT	

HARNETT CCT NTY DEPARTMENT OF PUB CHEALTH AUT... ORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by	
Harnett County Department of Public Health, Improvement Permit # 2095 9. 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.	
BANY HUGHT-5 919-669-5369 Name Telephone #	
Telephone #	
3055 - OID BUERS CREEK RD Anguan N.C. 77501 Address	
1443 CAFAGEHE 17D	
Property Location SR# Road Name	
Property Location SR# Road Name 1443	
Subdivision Lot # # Bedrooms Proposed Lot Size	
TYPE OF SYSTEM	
[New Installation [] Repair [Septic Tank [] Nitrification Lines	
[7] New Installation [7] Septic Tank [7] 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	
Depth of graver	
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 & Make & Duss	
Fronture of Authorized A cont for Homett County	
Date	