## HARN | COUNTY HEALTH DEPARTM

## HTE 04-5-10050

## **IMPROVEMENT PERMIT**

20888

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) Wear Dev, Septic Tank Property Location: SR# 14 Repairs Nitrification Line Subdivision Sunset Ridge Lot # 13 ( Basement with Plumbing: Garage: X ☐ Community Water Supply: Distance From Well: 53 Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Conventional Other Type of system: Septic Tank: (353 gallons Pump Tank: \_\_\_\_gallons Size of tank: exact length of each ditch 20 ft. Subsurface No. of width of depth of ditches 1824 in. Drainage Field ditches French Drain Required: Linear feet Date: 06-16-04 Signed: 9- UM

Environmental Health Specialist This permit is subject to revocation if site plans or intended use change. 150 109 115 150 STUB Of Plumbing Shallow Maintain All set Backs Keep drain Lini 15' from Top of Dith Crear Propuly Line

## AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described Harnett County Department of Public Health, Improvement Permit # 2088 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, arrived to the specifications described authorization will be invalid if ownership site plans, arrived to the specifications described authorization will be invalid if ownership site plans.	by This
This authorization will be invalid if ownership, site plans, or intended use change.	1 1110
We Aver Devi	
Name	
Telephone #	
Address	
1141	
Property Location SR#  Road Name	
Subdivision Lot # Bedrooms Proposed Lot Size	
Subdivision Lot # #Bedrooms Proposed Lot Size	
Lot bize	
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: 50 Ft.	
Septic Tank gal Pump Chamber gal	
NITRIFICATION FIELD SPECIFICATIONS	
SPECIFICATIONS	
Number of fields # of lines per field / Length of lines 250 Ft.	
Width of ditches ft. Depth of ditches inches	
French Drain: Linear feet required Depth of gravel	
Depth of gravel	
No wastewater system shall be covered or placed in 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 determined to the conditions of the Improvement Permit and that a valid Operations Permit has determined to the conditions of the Improvement Permit and that a valid Operations Permit has determined to the conditions of the Improvement Permit and that a valid Operations Permit has determined to the conditions of the Improvement Permit and that a valid Operations Permit has determined to the conditions of the Improvement Permit and that a valid Operations Permit has determined to the conditions of the Improvement Permit and that a valid Operations Permit has determined to the conditions of the Improvement Permit and that a valid Operations Permit has determined to the conditions of the Improvement Permit and that a valid Operations Permit has determined to the conditions of the Improvement Permit has determined to the conditions of the Improvement Permit has determined to the conditions of the Improvement Permit has determined to the conditions of the Improvement Permit has determined to the conditions of the Improvement Permit has determined to the conditions of the Improvement Permit has determined to the conditions of the Improvement Permit has determined to the Improvement Per	e
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Signature of Authorized Agent for Harnett County	
Signature of Authorized Agent for Harnett County	

Date