HARNTON COUNTY HEALTH DEPARTMI

HTE 04-5-10/21

IM. ROVEMENT PERMIT

21259

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) Confort Homes New Installation Septic Tank Property Location: SR#_14/2 Christian Line Repairs Repairs Subdivision Forest Trails ____ Lot # _ 9 Quadrant # Tax ID # Number of Bedrooms Proposed: Lot Size: 525 Ac 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. Fother Some to Conventional w/ Manitee Distribution Conventional Type of system: Septic Tank: 1000 gallons Size of tank: Pump Tank: 1000 gallons Subsurface No. of exact length width of depth of ditches 12-15 in. MAX of each ditch 75 ft. ditches 3 ft. ditches 5 Drainage Field French Drain Required: Linear feet Date: This permit is subject to revocation if site Signed: / plans or intended use change. Environmental Health Specialist * Mainteinall retbacks + Run ditches on contour * Ditches to be NO DEEPER than 15 inches * Purp needed 38 gm @ 13 TOH CC. * Dore 160 gallow XUSE 2" SUPPly Line * 5 taps 1/2" sch 40 * valve cover boxes needed over each tap * 6 inche of cover needed

HARNETT COUNTY DEPARTMENT OF PUF CHEALTH AUT DRIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Department of Public Health, Improvement Permit # 21257 . 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.
Name 919557-3242 Telephone #
P.C. Bex 369 Clayton, N.C. 27520 Address
Property Location SR# Christian Light Road Name
Forest Trail 9 3 Subdivision Lot # Bedrooms Proposed Lot Size
TYPE OF SYSTEM
[] New Installation [] Repair [] Septic Tank [] Nitrification Lines
[] Conventional [JOther Pump to Conventical w/Manitee Distribution
[] 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
No westewater quaters shall be a see a line of the lin
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.
Bun McLiels. a/2/2011
Signature of Authorized Agent for Harnett County Date