HTE04-5-10308

HARN COUNTY HEALTH DEPARTMI

IM-ROVEMENT PERMIT

21319

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) H9 H Constructors Deptic Tank Property Location: SR#_____ | 12 | Nitrification Line ☐ Repairs Subdivision 12000 Shipe Lot # 3 X ____Quadrant # Tax ID # Number of Bedrooms Proposed: 3(54x49) Lot Size: \$774 Basement with Plumbing: Garage: 👿 ☐ Well N Public Water Supply: Community 53 ft. Distance From Well: Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Dother Vum to Conventional Conventional Type of system: Septic Tank: 100 gallons Pump Tank: 100 gallons Size of tank: width of 3_ft. Subsurface exact length No. of ditches 12 fin. of each ditch 7° ft. Drainage Field ditches French Drain Required: Linear feet Date: 09-16-04 Signed: This permit is subject to revocation if site plans for intended use change. Environmental Health Specialist 1901 30 110 STUB of Plumbing shallow where shown & Pump May not be Required Meet onsite MAINTAIN All Set BACKI

AUTHORIZATION TO CONST JCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Department of Public Health, Improvement Permit # 2\3\9\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.
Ho H Gastactial
Telephone #
Address
1125
Property Location SR# NOCL Shipu 38 3(54x 44) Road Name 474
Subdivision Lot # # Bedrooms Proposed Lot Size
TYPE OF SYSTEM
New Installation [] Repair Sentic Tank
New Installation [] Repair Septic Tank [] Nitrification Lines [] Conventional Other Conventional Septic Tank Septic Ta
[] 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
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 wastewater system shall be covered or plantill to
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 9-16-04

Date