HARN COUNTY HEALTH DEPARTME

HTE 04-5-10426

IMPROVEMENT PERMIT

21242

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) RL PROPERTIES New Installation Septic Tank Nitrification Line Subdivision POPE'S LAKE Lot # 6+7 _____ Quadrant # _____ Tax ID # Number of Bedrooms Proposed: 4 Lot Size: 199Ac Garage: Basement with Plumbing: Water Supply: ☐ Well N Public Community Distance From Well: 50 ft. Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. ☐ Other X Conventional Type of system: Pump Tank: gallons Size of tank: Septic Tank: 1000 gallons exact length Subsurface depth of width of No. of ditches_36 in. max ditches 5 of each ditch 80 ft. ditches 3 ft. Drainage Field French Drain Required: Linear feet Date: 6 501 RSCOLIVER TOLKSOORF This permit is subject to revocation if site Signed: plans or intended use change. Environmental Health Specialist *MAINTAIN ALL SETBACKS *CALL WITH ANY QUESTIONS PRIOR TO INSTALLATION 156 CONVENTIONAL REPAIR 338 AREA 60

253

HARNETT CO TTY DEPARTMENT OF PUB CHEALTH AUTHORIZATION TO CONSTRUCT

Harnett County Department of Public Health, Improvement Permit # 27242 . 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.
RL PROPERTIES Name C39-4295 Telephone #
221 POPE LAKE RO ANGIER NC 27501
Property Location SR# Road Name
POPES LAKE 6-7 4 1.99AC Subdivision Lot # Bedrooms Proposed Lot Size
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
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 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