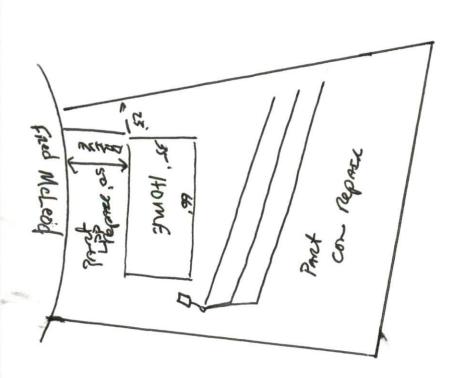
HTE 04-5-10449

HARNET COUNTY HEALTH DEPARTMENT IMPROVEMENT PERMIT

21358

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) Chaig Matthews New Installation Septic Tank Property Location: SR# 2008 Hanvell RD Repairs Nitrification Line Subdivision White PENES ____ Lot # ______ _____Quadrant # _____ Tax ID # Number of Bedrooms Proposed: 3 Lot Size: .63 Basement with Plumbing: Garage: Public ☐ Community ☐ Well Water Supply: 50 Distance From Well: ft. Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Conventional ☐ Other Type of system: Pump Tank: gallons Size of tank: Septic Tank: 1000 gallons Subsurface No. of exact length width of depth of ditches 18-20 in. ditches 3 of each ditch 100 ft. ditches 3 ft. Drainage Field French Drain Required: ____ Linear feet Date: 10 -14- 04 Signed: James & Mans This permit is subject to revocation if site plans or intended use change. Environmental Health Specialist



#04-5-10449

HARNETT C NTY DEPARTMENT OF PUI CHEALTH AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Department of Public Health, Improvement Permit # 21358 . This authorization shall be said for a mind of the second of the seco	
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.	
	_
Craig Matthews Name 910-890-4330 Telephone # 496 Hawell RD Coats N.C. 27521 Address	
Property Location SR#	Harvell Road Name
White PENES 16 Subdivision Lot # # Bea	3 .63
TYPE OF SYSTEM	
[New Installation [] Repair [Septic 7	
[] 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 100 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.	
5 - 1 -	0.2
Signature of Authorized Agent for Harnett County	10-14-04 Date