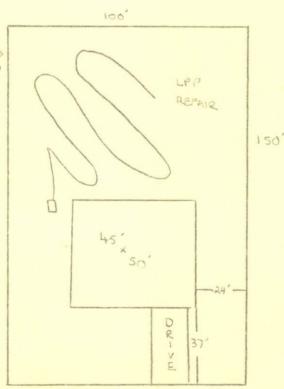
COUNTY HEALTH DEPARTM

IMPROVEMENT PERMIT

21250

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) SHOWCASE CONSTRUCTION	New Installation Septic Tank	
Property Location: SR# 1124 RAMBEAUT RO		
Subdivision WESTERFIELD FARMS	Lot # 32	
Tax ID #	Quadrant #	
Number of Bedrooms Proposed: 3		
Basement with Plumbing:		
Water Supply:	y	
Distance From Well:ft.		
Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval.		
Type of system: ☐ Conventional ☐ Other ☐ Other	& REDUCTION SYSTEM	
Size of tank: Septic Tank: gallons	Pump Tank:gallons	
Subsurface No. of exact length Drainage Field ditches of each ditch 360		
French Drain Required:Linear feet	Date: 10000	
This permit is subject to revocation if site plans or intended use change.	Signed: Environmental Health Specialist R5 (OLIVER TOLKSOOF	
	100	
* MAINTAIN ALL SETBACKS		
PRIORTO INSTALLATION		



HARNETT CO TTY DEPARTMENT OF PUF CHEALTH AUTHORIZATION TO CONSTRUCT

Harnett County Department of Public Health, Improvement Permit # 2\250. 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.		
SHOWCASE CONSTRUCTION	864-0989	
Name	Telephone #	
5506 YAOKIN RO FAVETTEVILLE NC	89886	
NA4 RAMBEAN RO Property Location SR#		
3	Road Name	
WESTERFIELD FARMS 32 3 Subdivision Lot##Bedrooms Pro	-345AC	
Subdivision Lot # # Bedrooms Pro	posed Lot Size	
TYPE OF SYSTEM		
New Installation [] Repair Septic Tank Nitrification Lines		
[] Conventional Di Other 25% REDUCTION SYSTEM		
[] Basement [] With Plumbing [] Without Plumbing		
Water Supply: [] Well Public Water Supply Minimum Well Setback: Ft.		
Septic Tank 1000 gal Pump Cham	iber 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	hy any person until an inquestion !	
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.		
1 All a		
Pathlel , Ill		
Signature of Authorized Agent for Harnett County	10/010/04	
- British Coulds	Date	