## H NETT COUNTY HEALTH DEPAR ENT

HTE 04-5-105/70

## **IMPROVEMENT PERMIT**

21270

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) Andrew Cregory Property Location: SR# 1541 Butts Ad. Repairs Nitrification Nitrification Line Subdivision Lot # Quadrant # Tax ID# Lot Size: \_\_\_ Number of Bedrooms Proposed: Garage: Basement with Plumbing: Public Community 2 Water Supply: Well Distance From Well: 50 m - ft. Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Conventional Other Type of system: Panp Tank: gallons Size of tank: Septic Tank: 1000 gallons exact length 60 B-Subsurface No. of width of depth of ditches \$4 of each ditch ft. Drainage Field ditches 3 ft. ditches 18-20 in. French Drain Required: Linear feet Date: This permit is subject to revocation if site Signed: plans or intended use change. Environmental Health Specialist \* Maintain all retback 208 \* Runditchy on contain +NO DEEPER the 20: rely HOJJE 76 X36' 38-208

## HARNETT OUNTY DEPARTMENT OF F LIC HEALTH 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 # 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.			
Andrew Cregory Name			-25 ( 9 phone #
Address P93 Bier Creek MC 22006			
Property Location SR#		Sutts Road Name	
Subdivision	Lot # # Bedroom	as Proposed Lot S	C Size
	TYPE OF S		,
[ ] New Installation [ ]	Repair [   Septic Tank	[-] Nitrification Li	nes
[ 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	4 Length of lines	GO 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	of for Harnett County	/5	Date