HARNF COUNTY HEALTH DEPARTME

HTE 04-5-10576

IM. COVEMENT PERMIT

21371

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) 131/17wg 5 Construction TNC New Installation Septic Tank Subdivision Victoria HIIIS Lot # 50 Quadrant # Tax ID # Number of Bedrooms Proposed: 3 Lot Size: .69 Garage: Basement with Plumbing: Public Water Supply: ☐ Well Community Distance From Well: 50° ft. Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Other 25% Reduction system Conventional Type of system: Septic Tank: 1000 gallons Pump Tank: gallons Size of tank: Subsurface No. of exact length width of depth of ditches 18-20 in. ditches Z of each ditch 150 ft. ditches 3 ft. Drainage Field French Drain Required: Linear feet 10-25-04 Date: \ Signed James & Markon Jeres This permit is subject to revocation if site plans or intended use change. Environmental Health Specialist Contractor to MEGT ONSITE Prior to
Plunbing Enstalled
*SystemLayout
May Change. 44 HOME Tylenstone pr

04-5-10576

HARNETT CO ITY DEPARTMENT OF PUB 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 will be invalid if ownership, site plans, or intended use change. BI/INSS Construction INC 195-9464 Name Telephone # 1001 Z Crew Chapel / AM N.C. 27517
Name Telephone #
Address Chapel Hall N.C. 27517
Property Location SR# Road Name
V. H. 50 3 .69 Subdivision Lot # Bedrooms Proposed Lot Size
TYPE OF SYSTEM
[New Installation [] Repair [Septic Tank [] Nitrification Lines
[] Conventional [+Other 25% Reduction Syste
[] 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 Z Length of lines /50 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.
James of Marta James 10.25 mil
Signature of Authorized Agent for Harnett County Date