HARN COUNTY HEALTH DEPARTMI

HTE 04-5-10717

IMPROVEMENT PERMIT

21280

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) O'Dell Betts New Installation Septic Tank Property Location: SR# 14/2 Christian Lightle Repairs Nitrification Line Subdivision Lake view __ Lot # 4 Tax ID # Quadrant # Number of Bedrooms Proposed:_______3 Lot Size: 41,311 ft2 Garage: Basement with Plumbing: Public Water Supply: Well Community Distance From Well: 50 in ~ ft. Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Other 25% Reduktion Syfe Type of system: Septic Tank: /000 gallons Size of tank: Pump Tank: Subsurface No. of exact length width of depth of of each ditch 75 ft. ditches 36-18 in. ditches J Drainage Field ditches 2 French Drain Required: Linear feet Date: This permit is subject to revocation if site Signed: plans or intended use change. Environmental Health Specialist 123 -* Maintan all Schocks * Ditches to be NO DEEPER then 36. relis

HARNETT COUNTY DEPARTMENT OF PUPI CHEALTH AUT ORIZATION TO CONSTR OF TO STREET

Harnett County Department of Public Health, Improvement Permit # 2 \(\text{LO} \). 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.
O'Dell Betts Name 919-552-52-84 Telephone #
Address N. Academy St. Fuguery Varina, N.C. 2726
Property Location SR# Road Name 4 3
Lake View 4 3 Subdivision Lot # Bedrooms Proposed Lot Size
TYPE OF SYSTEM
[New Installation [] Repair [] Septic Tank [] Nitrification Lines [] Conventional [] Other 25% Reduction Lines
[] 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 Ft.
Width of ditches ft. Depth of ditches 3 - # 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 Date