HARN'T COUNTY HEALTH DEPARTM

HTE 04-50012822

Meet on the

IN ROVEMENT PERMI.

21470

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) Cul72m Contracting Cont Property Location: SR# 201 Repairs Nitrification Line Ponderosa Trail Subdivision CARDINA SEASONS Lot # B-15 ____ Quadrant # _____ Tax ID #_____ Number of Bedrooms Proposed: 3 (28 x 54) Lot Size: 38AC Basement with Plumbing: Garage: 🔽 ☐ Well 2 Public Water Supply: Community 50 ft. Distance From Well: Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Conventional Type of system: Other____ Septic Tank: gallons Pump Tank: gallons Size of tank: Subsurface No. of exact length width of ditches 18-24 in. ditches 3 ft. Drainage Field of each ditch 200 ft. ditches French Drain Required: Linear feet Date: 12.3.04 This permit is subject to revocation if site Signed: plans or intended use change. Hnvironmental Health Specialist 164 21 Lel Persin 110 DRIVE MAINTAIN All Set Backs

HARNETT COUNTY DEPARTMENT OF PUBLIC HEALTH AU' ORIZATION TO CONST CT

Harnett County Department of Public Health, Improvement Permit # 2/475. This authorization shall be valid for a period not to exceed five (5) and 5.
the determination of the deter
This authorization will be invalid if ownership, site plans, or intended use change. Outom Name
Name Telephone #
Address
Property Location SR#
KO30 Name
CAROLINA STAJON B-15 3(28×54), 38m Subdivision Lot # #Bedrooms Proposed Lot Size
TYPE OF SYSTEM
New Installation [] Repair Septic Tank Nitrification Lines
Conventional [] Other
[] Basement [] With Plumbing [] Without Plumbing
Water Supply: [] Well Public Water Supply Minimum Well Setback: 50 Ft.
Septic Tank 1000 gal Pump Chamber gal
NITRIFICATION FIELD SPECIFICATIONS
Number of fields # of lines per field Length of lines 200 Ft
Width of ditchesft. Depth of ditchesinches
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.
Que Wast RS 12-07-04
Signature of Authorized Agent for Harnett County Date