## HARN COUNTY HEALTH DEPARTMI

## HTE04500/0804

## IMPROVEMENT PERMIT

21492

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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) Custom Contracting Conp Septic Tank Property Location: SR# 120 | HUMTER'S RIDGE Lot # \_ V-13 Subdivision CAROLINA SEASON Garage: Basement with Plumbing: Public Water Supply: Well Community Distance From Well: Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Other Type of system: Conventional Pump Tank: \_\_\_\_\_gallons Size of tank: Septic Tank: 1000 gallons depth of Subsurface No. of exact length width of ditches 3 ft. ditches 18-24 in. of each ditch 200 ft. Drainage Field ditches French Drain Required: Linear feet Date: 9 /2.22-04 Signed: 95 W25
Environmental Health Specialist This permit is subject to revocation if site plans or intended use change. STUB Out Plumbing Shallow Where Shown - At Geord lend or higher
MAINTAIN All Set Back - Keep draw Lines 15' from Property Line with Casement along it MTet Onsite- Em 1st Lines To be 18+024" Decy but once Lines 80 into Back yard keep Line, At 18" 0.4.6 QRAINASCI EASCMENT Inon 150' DRNE 20

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## HARNETT COUNTY DEPARTMENT OF PUBLIC HEALTH AU ORIZATION TO CONST. CT

Trained County Department of Public	Health, Improvement Permit # 2 1492 This
authorization shall be valid for a period	not to exceed five (5) years from the data of:
This authorization will be invalid if or	vnership, site plans, or intended use change
Custom Contracting Comp	
Name	Telephone #
A SC Suite and a second of the	
Address	
1201	
Property Location SR#	Road Name
LAROLWA Seasons V-13	# Bedrooms Proposed Lot Size
Subdivision Lot #	# Bedrooms Proposed Lot Size
<u>1</u>	TYPE OF SYSTEM
	Septic Tank Nitrification Lines
[ ] Other	
[ ] Basement [ ] With Plumbing [	] Without Plumbing
Water Supply: [ ] Well Publi	c Water Supply Minimum Well Setback:50 _Ft.
Septic Tank   DOO gal	Pump Chamber gal
	ION FIELD SPECIFICATIONS
Number of fields# of line	es per field Length of lines 200 Et
Width of ditchesft. Depth of ditchesinches	
French Drain: Linear feet required	
No wastewater system shall be covere	d or placed into use by any person until an inspection by the
Transcr County Treated Department ha	s determined that the system has been installed according to mit and that a valid Operations Permit has been issued.
0 1110	
LOC WEST P	12.22-04
Signature of Authorized Agent for Harnett Co	Date