HARNET COUNTY HEALTH DEPARTMET

HTEO4-50010927R

IMPROVEMENT PERMIT

21443

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) WILSON BUIET HONES New Installation Septic Tank Property Location: SR# 1437 BALLARD Ro Repairs Nitrification Line BALLARD WOODS Subdivision ___ Lot # _ 79 Tax ID # Quadrant # 3 265 "x124" Number of Bedrooms Proposed: Lot Size: Basement with Plumbing: Garage: 💆 ☐ Well Water Supply: N Public Community Distance From Well: \to ft. Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Type of system: Conventional Other Pume To INNOVATIVE Size of tank: Septic Tank: 1000 gallons Pump Tank:_____ Subsurface No. of exact length width of depth of ditches 4 of each ditch 75 ft. Drainage Field ditches 3 ft. ditches_ 24 French Drain Required: _____Linear feet Date: This permit is subject to revocation if site Signed: _ RS (OLIVER TOLKSPORE) plans or intended use change. Environmental Health Specialist 124 38 2104 DRAWING REPAIR EADEMENT POR LOT 77 PUMP * MAINTAIN ALL SETBACKS JUNOVATIVE REPAIR *FINAL LAYOUT TO BE DONE AFTER SITE IS CLEARED DITCH 5 343 60 45

HARNETT COUNTY DEPARTMENT OF PUBLIC HEALTH AUT. ORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Department of Public Health, Improvement Permit # 21443 . This authorization shall be valid for a period not to exceed five (5) was a first construct to the specifications described by authorization shall be valid for a period not to exceed five (5) was a first construct to the specifications described by authorization shall be valid for a period not to exceed five (5) was a first construct to the specifications described by authorization shall be valid for a period not to exceed five (5) was a first construct to the specifications described by authorization shall be valid for a period not to exceed five (5) was a first construct to the specifications described by authorization shall be valid for a period not to exceed five (5) was a first construct to the specific to th
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.
Name BUILT HOMES 919-422-3318
Telephone #
PO Box 6127 RALEIGH NC 2750) Address
Property Location SR#
Road Name
BALLARD WOORS 79 3 265 AZY Subdivision Lot # Bedrooms Proposed Lot Size
Subdivision Lot # Bedrooms Proposed Lot Size
TYPE OF SYSTEM
New Installation [] Repair Septic Tank Nitrification Lines
[] Conventional [X] Other Pump To INNOVATIVE
[] 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 3 ft. Depth of ditches 24 inches NW.
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
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the conditions of the Improvement Permit and that a valid Operations Permit has been issued.
Signature of Authorized Agent for Harnett County
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