## YETT COUNTY HEALTH DEPART

## HTE 05 5 00 11089R IMPROVEMENT PERMIT

21907

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) HEH Gostantons New Installation Septic Tank Property Location: SR# Lot# 63 WOODShiRC Subdivision Quadrant # \_\_\_\_\_\_\_ 4 8 4 c Tax ID # Number of Bedrooms Proposed: 3 (58 x 45) Lot Size: - 48 A c Basement with Plumbing: Garage: 🔀 Water Supply: ☐ Well Public ☐ Community Distance From Well: 53 Following is the minimum specifications for sewage disposal system on above captioned property. Subject Pump To to final approval. AlOther 25% Redution SYJTEM Conventional Type of system: Pump Tank: (000 gallons Septic Tank: 1000 gallons Size of tank: depth of Subsurface No. of exact length width of ditches 18" in. ditches 3 ft. of each ditch 300 ft. ditches Drainage Field French Drain Required: \_\_\_\_\_ Linear feet 125% Reduction System Date: 02.11-05 Signed: 92 MOJ
Environmental Health Specialist This permit is subject to revocation if site plans or intended use change. Meet on s. te For Final LAyort 154 DRIVE Circle 129

## HARNETT COUNTY DEPARTMENT OF PUBLIC HEALTH ATTHORIZATION TO CONSTRUCT

Transfer Country Dopas	anone of Lubing r	TEAULI Improvement Domo	o the specifications described tit # 21907	-
This authorization wi	Il be invalid if on	wnership, site plans, or int	ars from the date of issuance.	
HOH Consta			ometa use change.	
Name			Telephone#	
	1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			
Address				-
[][(				
Property Location SR#			Road Name	
Wood Shike	63	3(58x4r) # Bedrooms Proposed	480	
Subdivision	Lot#	# Bedrooms Proposed	Lot Size	-
		YPE OF SYSTEM	*	
New Installation	[] Repair	Septic Tank Ni	trification Lines	
[ ] Conventional	Other	Septic Tank Ni	-tyle	
[ ] Basement [ ] Wit			Ü	
Water Supply: [ ] W	ell M Publi	c Water Supply Minimum	Well Setback: 50 Ft.	
Septic Tank \ 03		Pump Chamber		
]	NITRIFICAT	ION FIELD SPECIF	ICATIONS	
Number of fields	# of line	es per field Len	egth of lines 300 F	
Width of ditches	3_ft. Depth	n of ditches \\\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	hes das % Redution s	ntee
French Drain: Linear	feet required	Depth of gravel		
u.				
No wastewater system	n shall be covered	or placed into use by one	person until an inspection by	
Table Country Hottl	ii Dobai iii ciii iias	S HELEHIIII PH I THAT THA Great Co.	person until an inspection by m has been installed according tions Permit has been issued.	the g to
Ove W	DAR	S	02 11 0.5	Maring at Person State State of the
Signature of Authorized	Agent for Harnett Co	unty	Date	