HTE 05-5-11/41

IMPROVEMENT PERMIT

21713

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) JASON BAHLES New Installation Septic Tank Property Location: SR#_1403 Cylesbory Ld. ☐ Repairs Nitrification Line ____ Lot # 35 Subdivision (Tax ID # Quadrant # Number of Bedrooms Proposed: 3 Lot Size: 187Ac Garage: Basement with Plumbing: Water Supply: ☐ Well Public ☐ Community Distance From Well: 50 m - ft. Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Fother 25 % feduction System ☐ Conventional Type of system: Septic Tank: 100 gallons Pump Tank: gallons Size of tank: Subsurface No. of exact length width of depth of of each ditch 240 ft. ditches F-24 in. Drainage Field ditches ditches u French Drain Required:____ Linear feet This permit is subject to revocation if site Signed: plans or intended use change. Environmental Health Specialist RJ. * Maintain all retbacks * Aua ditche an conteur 14KB Rd.

621

HARNETT (INTY DEPARTMENT OF PU C HEALTH AU I HORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Department of Public Health, Improvement Permit # 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.
Name 919-27-8790
Name 919-27-8790 Telephone #
7/21 Ock V. llay - Way Fogus Voina, N.C. 27/26 Address
1403 Chesbury
Property Location SR# Road Name
Subdivision Lot # Bedrooms Proposed Lot Size
TYPE OF SYSTEM
[] New Installation [] Repair [] Septic Tank [] Nitrification Lines
[] Conventional [] Other 25% leduct. System
[] Basement [] With Plumbing [] Without Plumbing
Water Supply: [] Well [Public Water Supply Minimum Well Setback:Ft.
Septic Tank /OOO gal Pump Chambergal
NITRIFICATION FIELD SPECIFICATIONS
Number of fields # of lines per field Length of lines _240 Ft.
Width of ditches ft. Depth of ditches 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.
and that a valid Operations Fermit has been issued.
Buy Medial. 3/21/2005
Signature of Authorized Agent for Harnett County Date