HARN TOUNTY HEALTH DEPARTM

HTE055011164

INTROVEMENT PERMIT

21529

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) Kent Pierce ______New Installation (Septic Tank Repairs Nitrification Line Lot # 96 Subdivision High Land Forest Quadrant # Tax ID # Number of Bedrooms Proposed: 3 (40 x 52) Lot Size: 44Ac Basement with Plumbing: Garage: ☐ Well ☐ Public ☐ Community Water Supply: Distance From Well:_____5 Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Sconventional Stother 25% Reduction STITEM Type of system: Septic Tank: 2003 gallons Pump Tank: gallons Size of tank: exact length width of of each ditch 150 ft. width of ditches 3 ft. depth of ditches 1824 in. Subsurface No. of Drainage Field ditches French Drain Required: _____Linear feet of 25% Reduction Soster Date: 01-25-05 Signed: () 57 This permit is subject to revocation if site plans or intended use change. High Land Forest On Invironmental Health Specialist 410 27 STUB Out Plumbing shallow - maintain All SetBAcks

AUTHORIZATION TO CONSTPUCT

Authorization is hereby given to construct a wastewater system to the specifications described farnett County Department of Public Health, Improvement Permit # 2152 is	by This
uthorization 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.	11113
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Telephone #	
ddress	
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roperty Location SR# Road Name	
Highland Fonest 96 3(40x52) 44m ubdivision Lot# #Bedrooms Proposed Lot Size	
TYPE OF SYSTEM	
New Installation [] Repair Septic Tank Nitrification Lines	
New Installation [] Repair Septic Tank Nitrification Lines Conventional Other 25% led to Septic Tank	
Basement [] With Plumbing [] Without Plumbing	
Water Supply: [] Well Public Water Supply Minimum Well Setback:50Ft.	
Septic Tank 1000 gal Pump Chamber gal	
NITRIFICATION FIELD SPECIFICATIONS	
Number of fields # of lines per field (Length of lines /)	
Width of ditches 3 ft. Depth of ditches 18 14 inches of 25% Reduction	
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 state of the country Health Department has determined that the country Health Department has determined the country Health Department has determined that the country Health Department has determined the country Health Department Health Department Health Department Health Department Health Department Health Department Health H	
Harnett County Health Department has determined that the system has been installed according the conditions of the Improvement Permit and that a valid Operations Permit has been issued.	he to
Signature of Authorized Aport 5-14	
Signature of Authorized Agent for Harnett County Date	