H. ETT COUNTY HEALTH DEPAR ENT

HTE 05500[132]

IIVIPROVEMENT PERIVIT

21919

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," Septic Tank Name: (owner) HOH CONTRACTORS Property Location: SR# Repairs Nitrification Line Lot # _ 9 X Subdivision WarDShine Tax ID# Quadrant # Number of Bedrooms Proposed: 3(50) 38) Lot Size: 642 AC Garage: 🔽 Basement with Plumbing: ☐ Well Public ☐ Community Water Supply: Distance From Well: Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Dother 25% Reduction SYSTEM Conventional Type of system: Septic Tank: /000 gallons Pump Tank: gallons Size of tank: exact length width of ditches 3 ft. Subsurface No. of ditches 18-24 in. Drainage Field ditches French Drain Required: _____ Linear feet & 25% Reduction System This permit is subject to revocation if site Signed: plans or intended use change. STUB Out Plumbing Shallow where Shown or Pump MAZ be Regulard Environmental Health Specialist P.tch 161 Deck 60436 15" 65x40 LPP Repair ARCA LE APPX 480 LF & LEP REGURES LE 14 trep system 15 from Top of Ditch

HARNETT COUNTY DEPARTMENT OF PUBLIC HEALTH ATTHORIZATION TO CONCTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Department of Public Health, Improvement Permit # 2\919 . 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. HOH CONTRuctor Inc.
Name Telephone # Address
1117
Property Location SR# Road Name 3 (50 x 38) Subdivision Road Name 4 2 AC Lot # Bedrooms Proposed Lot Size
Subdivision Lot # Bedrooms Proposed Lot Size TYPE OF SYSTEM
New Installation [] Repair Septic Tank Nitrification Lines [] Conventional A Other 25% Reduction STITEM
[] Basement [] With Plumbing [] Without Plumbing
Water Supply: [] Well Public Water Supply Minimum Well Setback: 50 Ft.
Septic Tank 1000 gal Pump Chamber gal
NITRIFICATION FIELD SPECIFICATIONS
Number of fields# of lines per field Length of lines Ft.
Number of fields # of lines per field Length of lines 300 Ft. Width of ditches ft. Depth of ditches 1824 inches SYTEM
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.
Signature of Authorized Agent for Harnett County Date