HARI T COUNTY HEALTH DEPARTM T

HTE 05-5-1137212 INITROVEMENT PERMIT 21633

Be it ordained by the Harnett County Board of Health as follows: Section of any building at which a septic tank system is to be used for disposal of from the Harnett County Health Department." Name: (owner) Garry Hughtes Property Location: SR# 1443 Lafayette 120	sewage without first obta	aining a written permit
Property Location: SR# 1993 CATAGETTE ICD	☐ Repairs	Nitrification Line
Subdivision_V.H. Z		
Tax ID #	Quadrant #	
Tax ID #	: 157 Acre	
Basement with Plumbing: Garage:		
Water Supply: ☐ Well		
Distance From Well:ft.		
Following is the minimum specifications for sewage disposal syston for sevage disposal syston for final approval.	em on above caption	ed property. Subject
Type of system: Conventional Other 25° 10 Redu	ection System	
Size of tank: Septic Tank: 1000 gallons Pump Ta	,	
Drainage Field ditches 2 of each ditch 150 ft. French Drain Required: Linear feet Date:	ditches_3ft.	nonhant was
ON SITTE PRIOR TO POSTALLATION.	APARA DE	
IOI RAYE	681 34 A. 34	Septic TANK Placement MAY VANY MAY SET IN BACK OR ON SIDE DEPENDENCE ON AUACHABLE SPACE.
Tylen	Stone DREV	<i>F</i>

HARNETT CONTY DEPARTMENT OF PURIC HEALTH AU...ORIZATION TO CONSTITUTE

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Department of Public Health, Improvement Permit #		
CARLY HU61HF5 Name Telephone # Address		
355 OID Baries Creak 17D Address		
Property Location SR# CAFAyETTE Road Name		
VATS Subdivision Lot # Bedrooms Proposed Lot Size		
TYPE OF SYSTEM		
[] New Installation [] Repair [] Septic Tank [] Nitrification Lines		
[] Conventional [Tother _ 25% Reduction		
[] 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 Z Length of lines 150 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.		
Signature of Authorized Agent for Harnett County Date		