HAR TT COUNTY HEALTH DEPART!

HTE 15-5-11421

IIVIPROVEMENT PERMIT

21851

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) TLW CORPONATION New Installation Septic Tank Property Location: SR# Z10 _____ □ Repairs Nitrification Line Subdivision PENECROFT ____ Lot # ___**/3** _____Quadrant # _____ Tax ID# Number of Bedrooms Proposed: 3 Lot Size: .575 kg. Basement with Plumbing: Garage: Public □ Well Water Supply: ☐ Community Distance From Well: 56' ft. Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Nother Pump to MANITER Con Type of system: Conventional Septic Tank: 1000 gallons Pump Tank: 1000 gallons Size of tank: Subsurface No. of exact length width of depth of ditches 3 of each ditch 115 ft. ditches 3 ft. ditches 30 ->18 in. Drainage Field French Drain Required: - Linear feet 3-23-05 This permit is subject to revocation if site plans or intended use change. Environmental Health Specialist Contractors to N.C. Hwy 210 60' 74W MEET ON STOR 4-3-34 SCH 40 TAPS INSTALLATION BERM 30 BEF o massage Home DREUE 20' FASEMENT

#85-5-11421

HARNETT JNTY DEPARTMENT OF PU IC HEALTH AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett-County Department of Public Health, Improvement Permit #	
Name Conformation	910 - 639 - 4935 Telephone #
Name 7/W Conformation Name 7/O - 639 - 4935 Telephone # 26 Fannaidge CT Awgien N.C. 27501 Address	
210	210
Property Location SR#	Road Name
Principal 13 Subdivision Lot # # Bedroom	3 1575
	•
TYPE OF ST	<u>YSTEM</u>
[New Installation [] Repair [] Septic Tank	
[Conventional [Other Pump to Man = 166	
[] Basement [] With Plumbing [] Without Plumbing	
Water Supply: [] Well [] Public Water Supply Minimum Well Setback:Ft.	
Septic Tank / 600 gal Pump C	hamber gal
NITRIFICATION FIELD SPECIFICATIONS	
Number of fields # of lines per field	3 Length of lines ///5 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.	
71 1 12.20	
James & MANLANT QUES	3-23-05
Signature of Authorized Agent for Harnett County	Date