HAI TT COUNTY HEALTH DEPART VI

HTE 05500 11498

I...PROVEMENT PERMIT

21757

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) Woodshire - Carres ______New Installation Septic Tank Property Location: SR#_/// Nitrification Line Subdivision Jood Shire Lot # 53 _____ Quadrant # __ Tax ID # Number of Bedrooms Proposed: 3BR Lot Size: . 50 A Garage: 🔽 Basement with Plumbing: ☐ Well Public Water Supply: Community 50' ft. Distance From Well: Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Other pump to 25/ redoction Type of system: Conventional Septic Tank: 100 o gallons Pump Tank: 1000 gallons Size of tank: Subsurface No. of exact length width of of each ditch 225 ft. ditches 18=24in. ditches 3 ft. Drainage Field ditches French Drain Required: Linear feet 25/12 Justin 3-17-05 This permit is subject to revocation if site Signed: 4 years
Environmental Health Specialist plans or intended use change. Lox 453 repair (480 LF) To. #25/ reduction needed * maintain all gethacks * mest on site J. line 247'

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 # 2/957. 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.	
Woodshire - Casings	481-0503
Name	Telephone #
2818 Raxford Rd Fagether- de	
Property Location SR#	Cottadale
Property Location SR#	Road Name
Subdivision Subdivision Subdivision Lot # # Bedrooms Proposed	.50A
Subdivision Lot # # Bedrooms Proposed	Lot Size
TYPE OF SYSTEM	
New Installation [] Repair [Septic Tank Witrification Lines	
New Installation [] Repair [] Septic Tank [] Nitrification Lines [] Conventional Other 25/2 (cdo+ni - pump	
[] Basement [] With Plumbing [] Without Plumbing	
Water Supply: [] Well [Public Water Supply Minimum Well Setback:Ft.	
Septic Tank /000 gal Pump Chamber /000 gal	
NITRIFICATION FIELD SPECIFICATIONS	
Number of fields (# of lines per field ! Length of lines 225 Ft.	
Width of ditches ft. Depth 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.	
Heatth (!	3-17.05
Signature of Authorized Agent for Harnett County	Date