HARNETT COUNTY HEALTH DEPARTMENT

HTE 05-5-11619R

IMPROVEMENT PERMIT

22001

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) Hame/tow Builders New Installation Septic Tank Nitrification Line Subdivision Plantation of Uturyand Green Tax ID# ____ Quadrant # __ Number of Bedrooms Proposed: 3 Lot Size: .481 Garage: Basement with Plumbing: Public Water Supply: ☐ Well Community Distance From Well: **50'** ft. Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Nother 25% Reduction System Conventional Type of system: Pump Tank:____ Size of tank: Septic Tank: 1000 gallons _gallons width of No. of exact length depth of Subsurface ditches 3 ft. ditches 2 of each ditch 150 ft. ditches 24718 in. Drainage Field French Drain Required:_____Linear feet This permit is subject to revocation if site plans or intended use change. Environmental Health Specialist 5 TEP DOWN S WELL BE NEEDED to LAyout May CHANGE 1150 * Contractor C 40' to MEGT on STE Prion to D INSTALLATION 1 L Y

HARNETT COUNTY DEPARTMENT OF PUBLIC HEALTH AUTHORIZATION TO CONSTRUCT

Harnett County Department of Public Health, Improvement Permit # 2700 / . 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.	
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Name	Telephone #
Hamplon Builders Name 280 f. Pine 57 Lollagon Address	N.C. 27546
Property Location SR# Amount of the Content of t	Tripp 12D
Property Location SR#	Road Name
Plantation at Grace 40	,481
Subdivision Lot # # Bedroom	ns Proposed Lot Size
TYPE OF S	
[New Installation [] Repair [Septic Tank	[] Nitrification Lines
[] Conventional [Tother 25% Neduction System	
[] Basement [] With Plumbing [] Without Plumbing	
Water Supply: [] Well	
Septic Tank // / / gal Pump C	Chambergal
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.	
C ES. I WIND	
Signature of Authorized Agent for Harnett County	5-4-05 Date