HTE 05-5-11619

HAR PATT COUNTY HEALTH DEPARTMENT IMPROVEMENT PERMIT

21857

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." New Installation Septic Tank Name: (owner) Hams/fox Busiders INC Property Location: SR# 1435 Tripp No. Repairs Nitrification Line Subdivision Plantation at VINGyand Grand
Tax ID #_ ____ Lot # __ 40 _____ Quadrant # _____ Number of Bedrooms Proposed: 3 Lot Size: . 481 Garage: Basement with Plumbing: Public Water Supply: □ Well Community Distance From Well: ft. Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Other 25% Reduction System Conventional Type of system: Size of tank: Septic Tank: 1000 gallons Pump Tank: gallons Subsurface exact length width of depth of No. of ditches_____ of each ditch______ft. ditches 3 ft. ditches 74->18 in. Drainage Field French Drain Required: _____ Linear feet 3.30.05 Date: This permit is subject to revocation if site plans or intended use change. Environmental Health Specialist Contractor to MEST ON SITE Prior to 149 From may
BE Regusted.
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HARNETT COUNTY DEPARTMENT OF PUBLIC HEALTH AU ORIZATION TO CONST... CT

Authorization is hereby given to construct a wastewater system to the specifications described by
Harnett County Department of Public Health, Improvement Permit # 21857 . 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.
Name 77878787878787878787878787878787878787
780 £ 7-11 (T
Hams How Builders INC Name 780 & Part ST Lallandon W.C. 77546 Address
11.30
Property Location SR# Road Name
Plastation Veweral 40 3 .481 Subdivision Lot # Bedrooms Proposed Lot Size
TYPE OF SYSTEM
[New Installation [] Repair [Septic Tank [Nitrification Lines
[] Conventional [] Other 25% Reduction Syst
[] 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/ Length of lines 3 & Ft.
Width of ditchesft. Depth of ditches 24>18inches
French Drain: Linear feet required Depth of gravel
Deput of graver
No wastewater system shall be covered or placed into use by any person until an inspection by the
Trained County realth Department has determined that the system has been installed
the conditions of the Improvement Permit and that a valid Operations Permit has been issued.
Market Duce
Signature of Authorized Agent for Harnett County Date
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