HALT TT COUNTY HEALTH DEPART

HTE 05-5- 1164912

I.... PROVEMENT PERMIT

21866

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) // Coston Hones INC | New Installation | Septic Tank |
Property Location: SR# 1448 ATKINS INS | Repairs | Nitrification Line ____ Lot # ____ Subdivision_ Canhan Hoursel Tax ID #______Quadrant #_____ Number of Bedrooms Proposed: ______3 ____Lot Size: _______75~~Z Basement with Plumbing: Garage: Z Public Water Supply: ☐ Well ☐ Community Distance From Well: 501 ft. Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. ☑ Conventional ☐ Other Type of system: Septic Tank: 1000 gallons Pump Tank: gallons Size of tank: Subsurface No. of exact length width of depth of __ of each ditch 300 ft. ditches 3 ft. ditches 22 -> 18 in. Drainage Field ditches French Drain Required: _____ Linear feet Date: This permit is subject to revocation if site plans or intended use change. Environmental Health Specialist

HARNETT (INTY DEPARTMENT OF PU CHEALTH AUTORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by
Harnett County Department of Public Health, Improvement Permit #
This authorization will be invalid if ownership, site plans, or intended use change.
However Homes IN 219-477-4025-
Name Telephone #
Name ## 105 STEIL Brows DR F.V. N.C. 2752C Address
1948 ATKINS Property Location SR# Road Name
Subdivision Lot # Bedrooms Proposed Lot Size
Subdivision Lot # # Bedrooms Proposed Lot Size
TYPE OF SYSTEM
[New Installation [] Repair [Septic Tank [Nitrification Lines
[Conventional [] Other
[] Basement [] With Plumbing [] Without Plumbing
Water Supply: [] Well [Public Water Supply Minimum Well Setback:Ft.
Septic Tank / COO gal Pump Chamber gal
NITRIFICATION FIELD SPECIFICATIONS
Number of fields # of lines per field / Length of lines Ft.
Width of ditches 3 ft. Depth of ditches 22->18 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.
Came & Manhar & Briss
Signature of Authorized Agent for Harnett County Date