HAR TT COUNTY HEALTH DEPARTN

HTE 05-5- //669 IMPROVEMENT PERMIT

21858

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) Charles DANIEL JARMON New Installation Septic Tank Property Location: SR# 1403 GKezhury RI) Repairs Nitrification Line Subdivision P.A.D PARTHERS __ Lot # ___/3 Tax ID # Quadrant # Number of Bedrooms Proposed:____ Lot Size: Basement with Plumbing: Garage: Water Supply: ☐ Well Public ☐ Community Distance From Well: 50° Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Other_ Type of system: **Z** Conventional Septic Tank: 1000 gallons 100° Pump Tank: gallons Size of tank: Subsurface No. of width of exact length depth of of each ditch 80 Drainage Field ditches > ft. ditches ditches/4 French Drain Required: Linear feet 8-131-05 This permit is subject to revocation if site plans or intended use change. ironmental Health Specialist 45' HOME G (15' 4 2763 D (20 SR1403 COKESBURY

HARNETT COUNTY DEPARTMENT OF PURI IC HEALTH AU ...ORIZATION TO CONST...CT

Harnett County Department of Public Health, Improvement Permit # 2183 authorization shall be valid for a period not to exceed five (5) years from the date	- a
This authorization will be invalid if ownership, site plans, or intended use change.	
Charles DANTE! JARMON 919-669 Name Telephon	
Telephon	ne#
3136 RAW 13 CHURCH FD F.V. N.C. 275	26
Property Location SR# Cokeshon Road Name	y 120
P.A.D. PartNBS 1B 3 68 Subdivision Lot # # Bedrooms Proposed Lot Size	3
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 gal Pump Chamber	gal
NITRIFICATION FIELD SPECIFICATIONS	
Number of fields# of lines per field Length of lines	80 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 and into use by any any and into use by any any any any any any any any any an	
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.	
	NEW PROPERTY AND ADDRESS OF THE PROPERTY AND ADDRESS OF THE PROPERTY AND
James & Marlon Lones	
Signature of Authorized Agent for Harnett County	-31-05
2 - I attorized rigent for Hamett Country	Date