HARI T COUNTY HEALTH DEPARTM

HTE 05-50012031

IMPROVEMENT PERMI

21850

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) Steve Jeanism (SIK Homes) New Installation & Septic Tank Property Location: SR# /// ☐ Repairs Nitrification Line Subdivision CRESTUICE Lot # 231 Ouadrant # Tax ID # Number of Bedrooms Proposed: 3(54 \ 41) Lot Size: • 38 AC Garage: & Meet onsite for Final Lagort Basement with Plumbing: Ocommunity MAINTAIN All set BACKS ☐ Well **Public** Water Supply: Distance From Well:____ 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: Septic Tank: 1000 gallons Pump Tank: gallons Size of tank: Subsurface exact length of each ditch 180 ft. No. of width of ditches 1824 in ditches 3 ft. Drainage Field ditches French Drain Required: Linear feet of 25% Reduction system Date: 05-05-05 Signed: ______ This permit is subject to revocation if site Shallow plans or intended use change. Entironmental Health Specialist 200 LIS 3 BR 54x41 176 25 110 Road

AUTHORIZATION TO CONSTRUCT

Harnett County Department of Public Health, Improvement Permit # 2\85 This authorization will be invalid if ownership, site plans, or intended use change.
Steve Jernigen Sek Homes
Telephone #
Address
Property Location SR#
Chertinal 231 3(54x41) Road Name Road Name 3(54x41) Subdivision Lot# #Balance
Subdivision Lot # # Bedrooms Proposed Lot Size
TYPE OF SYSTEM
New Installation [] Repair Septic Tank Nitrification Lines [] Conventional [Other 25% Pedarisa SYSTER
[] Basement [] With Plumbing [] Without Plumbing
Water Supply: [] Well Public Water Supply Minimum Well Setback: 50 Ft. Septic Tank DOO gal Pump Chamber gal
NITRIFICATION FIELD SPECIFICATIONS
Number of fields # of lines per field Length of lines Ft.
Width of ditches ft. Depth of ditches
Width of ditches ft. Depth of ditches ft. Depth of gravel Ft. French Drain: Linear feet required Depth of gravel System
No westowed and 1 111
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.
Signature of Authorized Agent for Harnett County Date