HTE 05-5- 12108

IMPROVEMENT PERMIT

22016

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) BRIAN HERRING New Installation Septic Tank Nitrification Line Subdivision BUTE FARMS ___ Lot # __ **4** Quadrant # Tax ID # Number of Bedrooms Proposed: 3 Lot Size: 2.82 Basement with Plumbing: Garage: 7 **Public** Community Distance From Well: Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Conventional Type of system: Other Size of tank: Septic Tank: 1000 gallons Pump Tank: gallons Subsurface No. of exact length width of depth of ditches_3 of each ditch 133 ft. Drainage Field ditches 3 ft. ditches 24-18 in. French Drain Required: Linear feet Date: 5-19-05 This permit is subject to revocation if site plans or intended use change. Signed: Environmental Health Specialist Home 426 CORNER or Peac conver STREET

HARNETT C JNTY DEPARTMENT OF PU IC HEALTH AU ...ORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Department of Public Health, Improvement Permit # 220/6. This authorization shall be valid for a period not to aveced for (5)	
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 Henring	814-9534 Telephone #
Name 364 Rocky RUN LANG Letterfor Address	N.C. 77546
Property Location SR#	Z7 Road Name
Buie Fanus 4 3 Subdivision Lot # Bedrooms Proposed	
TYPE OF SYSTEM	
[New Installation [] Repair [Septic Tank []]	
[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 Ft.	
Width of ditches ft. Depth of ditches _24718 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.	
Signature of Authorized Acoustin III	5-18-05
Signature of Authorized Agent for Harnett County	Date