## HARNET OUNTY HEALTH DEPARTMEN

HTE 05-5- 12412

## IMPROVEMENT PERMIT

22048

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) Bernand Yours New Installation Septic Tank Property Location: SR#\_1557 Johnston County 23 Repairs Nitrification Line Subdivision BY \_\_\_\_ Lot # \_ **2** \_\_\_\_\_ Quadrant # \_\_\_\_\_ Tax ID # Number of Bedrooms Proposed: 3 Lot Size: .93\*\*\*\* Garage: Basement with Plumbing: Public Water Supply: ☐ Well Community Distance From Well: 50' ft. Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. **Z** Conventional ☐ Other Type of system: Pump Tank: \_\_\_\_\_gallons Size of tank: Septic Tank: 1000 gallons Subsurface No. of exact length width of depth of ditches 3 of each ditch 70 ft. ditches 3 ft. ditches 24 in. Drainage Field French Drain Required: \_\_\_\_\_ Linear feet Date: 6-27-05 This permit is subject to revocation if site plans or intended use change. Environmental Health Specialist J.C. Roms SR 155/ 25

#05-5-12417

## HARNETT COUNTY DEPARTMENT OF PU IC HEALTH AU ...ORIZATION TO CONSTRUCT

Bernand Young	intended use change.
Name	Telephone #
Bernand Young  Name  3485 Johnston Comby ND Angust  Address	N.C. 27501
1551	Tabulat 1 C. 1 22
Property Location SR#	Road Name
BY. Z 3	. 9 3
Subdivision Lot # # Bedrooms Proposed	· 93 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 Minimu	ım Well Setback:Ft.
Septic Tank gal Pump Chamber	gal
NITRIFICATION FIELD SPECI	
Number of fields # of lines per field I	ength of lines 70 Ft.
Width of ditches ft. Depth of ditches inches	
French Drain: Linear feet required Depth of gravel	
Depin of graver	
No wastewater system shall be covered or placed into use by a	ny person until an inspection by the
Harnett County Health Department has determined that the system the conditions of the Improvement Permit and that a valid Operation	tem has been installed account:
the conditions of the improvement Permit and that a valid Once	motions D. 11 1