HARI T COUNTY HEALTH DEPARTM [

HTE 05-5-12485

IMPROVEMENT PERMIT

22160

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 Jeween A New Installation Septic Tank
Property Location: SR# 1435 Tripp RD Repairs Nitrification Line Subdivision Plantation at Vaveyand once ____Lot # __**6Z** _____ Quadrant # _____ Tax ID # 3 Lot Size: .56 Number of Bedrooms Proposed: Garage: 2 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. TOther 25% Reduction Syste Type of system: Conventional Size of tank: Septic Tank: 1000 gallons Pump Tank: gallons Subsurface No. of width of exact length depth of of each ditch 80 ft. ditches 4 ditches 3 ditches 2-730 in. Drainage Field French Drain Required: Linear feet Signed Embaufour Environmental Health Specialist This permit is subject to revocation if site plans or intended use change. Sweet Jerry LANA

#05-5-12485

HARNETT COUNTY DEPARTMENT OF PUTIC HEALTH AU__IORIZATION TO CONST...JCT

Authorization is hereby given to construct a wastewater system to the specifications described by	
Harnett County Department of Public Health, Improvement Permit # 22160 . This 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	919-625-0363
	Telephone #
Name 4609 Forest Highland Dr Ralege Address	N.C. 77604
Address	
/435	Tripp
Property Location SR#	Road Name
Plantation 62 3	.56
Subdivision Lot # # Bedrooms Pro	posed Lot Size
TYPE OF SYSTEM	
	[11] [12] [12] [13] [13] [14] [15] [15] [15] [15] [15] [15] [15] [15
[New Installation [] Repair [Septic Tank	
[] Conventional [] Other 75% Robbits Sed	
[] Basement [] With Plumbing [] Without Plumbing	
Water Supply: [] Well [] Public Water Supply Minimum Well Setback:Ft.	
Septic Tank gal Pump Cham	lber gal
NITRIFICATION FIELD SPECIFICATIONS	
Number of fields # of lines per field 4	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 person until an inspection by the	
Trained County frealth Department has determined that the system has been installed asset 1:	
the conditions of the Improvement Permit and that a valid Operations Permit has been issued.	
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James E Manhant Rings	7
Signature of Authorized Agent for Harnett County	7-14-85 Date
V	Date