## **IMPROVEMENT PERMIT** 22752

construction of any building at which a septic tank system is to be us permit from the Harnett County Health Department."	ed for disposal of sewage without first obtaining a written
Name: (owner) BILLINGS Construction TWC No	ew Installation Septic Tank Repair
Name: (owner) BILLINGS CONSTRUCTION THE NE Property Location: SR# 1440 CAPAGETTE RD Subdivision VICTORIA HT/IS Tax ID#	Nitrification Line Expansion Lot #
Tax ID#	Quadrant #
Tax ID#  Number of Bedrooms Proposed :	Lot Size: 35, 1000 SFT
Basement with Plumbing:  Garage:  Garage:	,
Water Supply: Well Public Community	T .
Distance From Well: ft.  Following is the minimum specifications for sewage dispo	isal system on above captioned property.
Subject to final approval	
Type of system:    Conventional    Other <u>25%</u>	Reduction Systa
Size of tank: Septic Tank: gallons	ank: gallons
Subsurface No. of exact length Drainage Field ditches 5 ft. of each ditch 80	width of depth of ft. ditches 20 in.
French Drain Required:Linear feet	Date: 9-21-05
This permit is subject to revocation if site plans or intended use change.	PERMIT EXPIRES 5 YEARS FROM ABOVE DATE
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Tylenston	

## AUTHORIZATION TO CONSTUCT

Harnett County Department of Public Health, Improvement Permit # 22752  This authorization shall be valid for a period not to exceed five (5) years from the latest authorization shall be valid for a period not to exceed five (5) years from the latest authorization shall be valid for a period not to exceed five (5) years from the latest authorization shall be valid for a period not to exceed five (5) years from the latest authorization shall be valid for a period not to exceed five (5) years from the latest authorization shall be valid for a period not to exceed five (5) years from the latest authorization shall be valid for a period not to exceed five (5) years from the latest authorization shall be valid for a period not to exceed five (5) years from the latest authorization shall be valid for a period not to exceed five (5) years from the latest authorization shall be valid for a period not to exceed five (5) years from the latest authorization shall be valid for a period not to exceed five (5) years from the latest authorization shall be valid for a period not to exceed five (5) years from the latest authorization shall be valid for a period not to exceed five (5) years from the latest authorization shall be valid for a period not to exceed five (5) years from the latest authorization shall be valid for a period not to exceed five (6) years from the latest authorization shall be valid for a period not to exceed five (6) years from the latest authorization shall be valid for a period not to exceed five (6) years from the latest authorization shall be valid for a period not to exceed five (6) years from the latest authorization shall be valid for a period not to exceed five (6) years from the latest authorization shall be valid for a period not to exceed five (6) years from the latest authorization shall be valid for a period not to exceed five (6) years from the latest authorization shall be valid for a period not to exceed five (6).
This authorization will be invalid if ownership, site plans, or intended use change.
Bellengs Construction Fuc 919-795-9464 Name Telephone #
100/7 Crew Chapel Hall NC. 27517  Address
Property Location SR#
Road Name
Subdivision Lot # Bedrooms Proposed Lot Size
TYPE OF SYSTEM
[ New Installation [ ] Repair [   Septic Tank [   Nitrification Lines
[] Conventional [] Other 25% naduation
[ ] 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 5 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 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.
perations Fermit has been issued.
Signature of Authorized A gent for Hamon & 8-71-05
Signature of Authorized Agent for Harnett County  Date