HTE# 05-500 13676

IMPROVEMENT PERMIT 22422

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) Ham: Itan Builders New Installation Septic Tank & Repair Property Location: SR# 1229 Nitrification Line Expansion Subdivision Avas Ridge

Tax ID#

Number of Bedrooms Proposed: 3(45×50) 360 gpd

Lot # | Quadrant # | Lot Size: .59 Ac Basement with Plumbing: Garage: Garage: Water Supply: Well Public ☐ Community Distance From Well: 50' ft. Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Size of tank: Septic Tank: 1000 gallons Pump Tank: _____ gallons width of exact length Subsurface No. of Drainage Field ditches 1 ft. of each ditch 300 ft. ditches 3 ft. ditches 18-24 in. French Drain Required: Linear feet Date: 14-05 PERMIT EXPIRES 5 YEARS FROM ABOVE DATE This permit is subject to revocation if site plans or intended use change. Signed: Sallin Environmental Health Specialist DRIVE 141 15 STUD out Plumbing shallow ground land or higher Donot
Maintain All Jet Dacks
Meet on sit if Any Questions or Problems ARILL on Septic STITEM

HARNETT COUNTY DEPARTMENT OF PUBLIC HEALTH 'JTHORIZATION TO COI TRUCT

Authorization is hereby given to construct a wastewater. Harnett County Department of Public Health, Improver authorization shall be valid for a paried.	
authorization shall be valid for a period not to exceed fi This authorization will be invalid if ownership, site pla	Ve (5) veera from 11 1
Hamilton Buldus	
Name	Telephone #
Address	
1229	
Property Location SR#	Road Name
AVA') Ridge / 3(YSXS3) Subdivision Lot## Bedrooms Pr	Daypel Jan
TYPE OF SYS	
New Installation [] Repair Septic Tank	₩ Nitrification Lines
Conventional [] Other	, a
[] Basement [] With Plumbing [] Without Plumbi	ing
Water Supply: [] Well Public Water Supply M	linimum Well Sethack: 5.7
10-0	nbergal
NITRIFICATION FIELD S	
Number of fields# of lines per field	Length of lines 300
Width of ditchesft. Depth of ditchesinches	
French Drain: Linear feet required Depth of gravel	
No wastewater system shall be covered or placed into us Harnett County Health Department has determined that t	o by one
Harnett County Health Department has determined that the conditions of the Improvement Permit and that a vali	
0122	THE PROPERTY OF THE PROPERTY O
29 Jan Word To	12.14-05
Signature of Authorized Agent for Harnett County	Date