IMPROVEMENT PERMIT 22424

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) Han. It Buldens New Installation Septic Tank Repair Property Location: SR# | 229 | Nitrification Line | Expansion | Subdivision | Lot # 6 | Lot # 6 | Lot # 6 | Number of Bedrooms Proposed: 3 (50 x 76) 363 x 80 | Lot Size: .58 A c Basement with Plumbing: Garage: Garage: Distance From Well: 50 ft. Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Type of system: Conventional Other____ Size of tank: Septic Tank: _____ gallons Pump Tank: _____ gallons Subsurface No. of exact length width of depth of Drainage Field ditches ft. of each ditch ft. of each ditches ft. ditches ft. ditches ft. ditches French Drain Required: Linear feet Date: 12-14-05 This permit is subject to revocation if site PERMIT EXPIRES 5 YEARS FROM ABOVE DATE plans or intended use change. Environmental Health Specialist Signed: 96 Shallow where Shown (ground level or higher) 392 50x4C 15 Maintain All set BAIKS Do not Drive on park on Jeptin systm 13" 43 Met on site it Problems or Question Arises

HARNETT COUNTY DEPARTMENT OF PUBLIC HEALTH 'JTHORIZATION TO CO' TRUCT

Harnett County Department of Public Health, Improvement Permit # 22424	
This authorization will be invalid if ownership, site plans, or intended use of issuance.	
HAmilton Bulden Name	
Tyanic	Telephone #
Address	
1229	
Property Location SR#	Road Name
AVA'S Filly 6 3(5.	oms Proposed Lot Size
Subdivision J Lot# #Bedro	oms Proposed Lot Size
TYPE OF	
New Installation [] Repair Septic Tai	(프로그램 - Barrier
Conventional [] Other	
[] Basement [] With Plumbing [] Without Plumbing	
Water Supply: [] Well Public Water Supply Minimum Well Setback: 50 Ft.	
Septic Tank gal Pump Chamber gal	
NITRIFICATION FIELD SPECIFICATIONS	
Number of fields# of lines per field _	Length of lines 75
Width of ditches ft. Depth of ditches _	/Port 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 county Health Department has determined the county Health Hea	
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.	
A COUNT ISSUED.	
On Work RS	
Signature of Authorized Agent for Harnett County	12-14-05
1	Date