HTE#<u>05-5001370</u>6

## IMPROVEMENT PERMIT 22430

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) Bobby Worlds  New Installation Septic Tank Repair  Property Location: SP# 1206	
1 Topolity Location   Inc.   A Evangion   I	
Subdivision AVA J (2:dge Lot # 2	
Subdivision AVAS Ridge Lot # 2  Tax ID# Quadrant #  Number of Bedrooms Proposed: 3(5/x31) 765 ppd Lot Size: 57AC	
Basement with Plumbing: Garage: Garage:	
Water Supply:  Well Public Community	
Distance From Well: 75° ft.	
Following is the minimum specifications for sewage disposal system on above captioned property.	
Subject to final approval.	
Type of system: \( \begin{align*} \text{Conventional} \text{\textit{\infty}} \text{Other} \( \frac{25\sqrt{\infty}}{\text{Reduction}} \) \( \text{STJTEM} \)	
Size of tank: Septic Tank: gallons Pump Tank: gallons	
Subsurface No. of exact length width of depth of Drainage Field ditches 3 ft. of each ditch 75 ft. ditches 3 ft. ditches 18-24 in.  French Drain Required: Linear feet 25% Reduction 501+000	
Date: 12-20-05	
This permit is subject to revocation if site  PERMIT EXPIRES 5 YEARS FROM ABOVE DATE	
plans or intended use change.  5745 of Plumbing Shallow  Mintain All set Backs  Signed:  Invironmental Health Specialist	
136' 130	
Dave Cane	
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## HARNETT COUNTY DEPARTMENT OF PUBLIC HEALTH AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by
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.
()
Bobby World!
Name Telephone #
Address
Property Location SR#
Road Name
AVAS Ridge 2 3(5/1/31) 363 pd & 57AC Subdivision Lot # Bedrooms Proposed Lot Size
Lot # Bedrooms Proposed Lot Size
TYPE OF SYSTEM
New Installation [ ] Repair Septic Tank Nitrification Lines
[ ] Conventional MOther 25% Reduction SYSTEM
[ ] 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   Tr
Number of fields# of lines per field Length of lines Ft.  Width of ditches ft. Depth of ditches inches SYSTEM
French Drain: Linear feet required Depth of gravel
Depth of gravel
No wastewater system shall be saven to the first transfer of the saven to the saven
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.
and that a valid Operations Permit has been issued.
Vor West RS 1222
Signature of Authorized Agent for Harnett County  Date