HTE# 05-50013708

IMPROVEMENT PERMIT 22431

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: SR# 2つら Nitrification Line Expansion French Orain To Be 48 to 54" Deg Basement with Plumbing: Garage: Community with gravel To within 6" A The Top A Public Water Supply: Well Distance From Well: _____ ft. Distance From Well: _____ ft. The ground.

Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Conventional Other Type of system: Size of tank: Septic Tank: \\ \O \O \O \ \ gallons \quad Pump Tank: _____ gallons No. of ditches ft. of each ditch 300 ft. ditches ft. depth of depth of ditches ft. ditches ft. ditches ft. Subsurface Drainage Field French Drain Required: 47 350 Linear feet 12.20-05 PERMIT EXPIRES 5 YEARS FROM ABOVE DATE This permit is subject to revocation if site plans or intended use change. Environmental Health Specialist Meet mit St DACK 78R My Mile , ste o Daywage EAsement

HARNETT COUNTY DEPARTMENT OF PUBLIC HEALTH A THORIZATION TO CONTRUCT

Harnett County Department of Public Health, Improvement Permit # 2243 . 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
Robby World Name Telephone #
Name Telephone #
Address
1229
Property Location SR# Road Name
AVAS Ridge 9 3(44x)6) 363 72 Subdivision Lot # #Bedrooms Proposed Lot Size
Subdivision Lot # #Bedrooms Proposed Lot Size
TYPE OF SYSTEM
New Installation [] Repair Septic Tank Nitrification Lines
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 Ft.
Width of ditches ft. Depth of ditches $\frac{18-24}{100}$ inches
French Drain: Linear feet required
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.
- sand Operations I ethnic has been issued.
On Wort RS 12-22-05
Signature of Authorized Agent for Harnett County Date