HTE#<u>06-500139</u>25R

IMPROVEMENT PERMIT 22525

construction of any building at which a septic tank system is to be permit from the Harnett County Health Department."	used for disposal of sewage without first obtaining a written
Name: (owner) B. 11 Clark Homes	New Installation Septic Tank Repair
Property Location: SR# 1139	Nitrification Line Expansion
Subdivision PAHONI COMT	Lot # 1\3
Tax ID# Number of Bedrooms Proposed: 3(45x52) 36	Quadrant #
	Sepa Lot Size: 4 34
Basement with Plumbing: Garage:	4
Water Supply: Well Public Community Distance From Well: ft.	ty
Following is the minimum specifications for sewage disp	oosal system on above captioned property.
Type of system: Conventional Other	up to 25% reduction SYSTER
Size of tank: Septic Tank: 1000 gallons Pump	Tank: <u>(つ)</u> gallons
Subsurface No. of exact length Drainage Field ditches ft. of each ditch	width of the ditches 3 ft. depth of ditches 1824 in.
French Drain Required:Linear feet	Date: 2-17-06
This permit is subject to revocation if site	PERMIT EXPIRES 5 YEARS FROM ABOVE DATE
plans or intended use change.	I DAMINI DAN INCOMINDO VE DINIE
	Signed: D~LAR
SR1139	
145	Environmental Health Specialist
18 Street Scape Buffer	25
	125
1,3	1 12 7
Meet onsite	Payain 1 12 /2
for Final LAgot	A / " /
Keip drain Line 20 from	Of 30 Mar
Pear property Line	II Very 30
MAINTAIN All Set BACKS	Mr.

HARNETT COUNTY DEPARTMENT OF PUBLIC HEALTH AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by	
Harnett County Department of Public Health, Improvement Permit # 22525 . 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.	
Bill Clank Homes	
Name Telephone #	
Address	
Property Location SR# Road Name	
Property Location SR# Road Name	
Pattoni Bont 113 Subdivision Lot # Bedrooms Proposed Road Name Road Name Road Name Road Name Lot Size	
Subdivision Lot # Bedrooms Proposed Lot Size	
TYPE OF SYSTEM	
New Installation [] Repair Septic Tank Nitrification Lines	
New Installation [] Repair Septic Tank [Nitrification Lines [] Conventional HOther Pump to 25% Reduction SYSTEM	
[] 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 Length of lines Ft. Width of ditches 8. Depth of ditches inches Ft.	
French Drain: Linear feet required Depth of gravel	
Depin of graver	
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	
he conditions of the Improvement Permit and that a valid Operations Permit has been issued.	
J.17.06	
Signature of Authorized Agent for Harnett County Date	