IMPROVEMENT PERMIT 22859

Be it ordained by the Harnett County Board of Health as construction of any building at which a septic tank system is to be permit from the Harnett County Health Department."	e used for disposal of sewage without first obtaining a written
Name: (owner) STEVE AllEN Const Co	New Installation Septic Tank Repair
Property Location: SR# 1452 Truelove RIS Subdivision Jonathan Redge	Lot # /2
Tax ID# Number of Bedrooms Proposed: 360 6P5	Quadrant #
	Lot Size: 35, 528 55 15
Basement with Plumbing: Garage:	
Water Supply: Well Public Communication Well: ft.	
Following is the minimum specifications for sewage di	sposal system on above captioned property.
Subject to final approval.	1 20 () 1
Type of system: Conventional Other <u>25%</u>	o reduction system
Size of tank: Septic Tank: 1000 gallons Pump	p Tank: gallons
Subsurface No. of Drainage Field ditches 4 ft of each ditch	width of depth of ft. ditches 22" in.
French Drain Required:Linear feet	Date: 3-28-06
This permit is subject to revocation if site plans or intended use change.	Signed Ames EManhast and Environmental Health Specialist
Theorem 100 E	

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 # _22859 . 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.	
STEVE ALLEN CONST Co Name 919-779-0138 Telephone #	
Telephone #	
8909 Ransdell RD Rateral N.C. 27603	
Property Location SR# Road Name	
Jonathons Rudge 12 3Bn- 7606PD 35,92851 FT Subdivision Lot # # Bedrooms Proposed Lot Size	
TYPE OF SYSTEM	
[New Installation [] Repair [Septic Tank [Nitrification Lines	
[] Conventional [+Other 25 % Newlyction 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 ft. Depth of ditches 22 _ inches	
French Drain: Linear feet required Depth of gravel	
Beptil 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	
the conditions of the Improvement Permit and that a valid Operations Permit has been issued.	
James EMANHAND OVES 3-28-06	
Signature of Authorized Agent for Harnett County Date	