HTE# 06-5-14310

## **IMPROVEMENT PERMIT 22851**

Be it ordained by the Harnett County Board of Healti construction of any building at which a septic tank system is to permit from the Harnett County Health Department."	h as follows: Section III, Item B. "No person shall begin o be used for disposal of sewage without first obtaining a written
Name: (owner) TRIMARK DEVEL	New Installation Septic Tank Repair
Property Location: SR# 1403 Cohesbury RI) Subdivision Cokesbury PARK	Nitrification Line  Expansion  Lot # 22
138 11 14	Quadrant #
Number of Bedrooms Proposed : 38m 360	Lot Size:
Basement with Plumbing: Garage:	
Water Supply:  Well Public Communication  Well:  ft.	munity
Following is the minimum specifications for sewage Subject to final approval	
Type of system: Conventional Other 25	5% Reduction System
	imp Tank: gallons
Subsurface No. of exact length Drainage Field ditchesft. of each ditch	width of depth of ft. ditches 3 ft. ditches 24° in.
French Drain Required:Linear feet	Date: 3-23-06
This permit is subject to revocation if site	PERMIT EXPIRES 5 YEARS FROM ABOVE DATE
mlans on intended use sharps	v
V 7 The report	Signed: ame & Markon for
System to BG	Environmental Health Specialist
10 off of Left	, v
PL. Lot 21	Contractor to Contract
FERCE SISTEMS 181	
to BE OVER ?	to Installation
02000	40 COSPACIANOS.
43.	
44' Home	-C16'7
25 Park	la pois
CokesBURY PAR	K LN

#06-5-14310

## HARNETT COUNTY DEPARTMENT OF PUBLIC HEALTH AUTHORIZATION TO CONSTRUCT

Harnett County Department of Public Health, Improvement Permit #		
Name  1271 Schaub DR RAIEASL  Address		913-601-5807 Telephone #
1271 Schaub DR RAIETSL	N.C. 27606	
7403 Property Location SR#	Coha Road Na	shing RS
Subdivision PARK 77  Subdivision Lot #	3BM 366PD # Bedrooms Proposed	Lot Size
TYPE OF SYSTEM		
[ New Installation [ ] Repair [ Sept		n Lines
[] Conventional [] Other 25% reduction Syst		
[ ] 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 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 system has been installed according to the conditions of the Improvement Permit and that a valid Operations Permit has been issued.		
James & Montput en	_	3-23-06
Signature of Authorized Agent for Harnett County		Date