HTE# 06-5-14377

IMPROVEMENT PERMIT 22870

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) Brian Johnson Builden New Installation Septic Tank Repair
Property Location: SR# 1429 Chalzbeate 123 Nitrification Line Expansion Dexience Lot # 18
Vumber of Bedrooms Proposed: 3 320 500 Lot Size: .461 Ac. OR .349?
Basement with Plumbing: Garage:
Water Supply: Well Public Community Distance From Well: 53. ft.
Following is the minimum specifications for sewage disposal system on above captioned property.
Subject to final approval.
Type of system: Conventional Other 25% Reduction System
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 80 ft. ditches 3 ft. ditches 3 in.
French Drain Required:Linear feet
This permit is subject to revocation if site Date: 4-4-06 PERMIT EXPIRES 5 YEARS FROM ABOVE DATE
plans or intended use change.
Signed Emvironmental Health Specialist
116
^
54'
Y N
25. 65. A
25 40 HOWE 40 8
2 40 HOME 40
27' > 60' 27' >
10
LPRepain sig &
OVERBY CT
OVERIME CI

HARNETT COUNTY DEPARTMENT OF PUBLIC HEALTH AUTHORIZATION TO CONSTRUCT

			the specifications described b		
Harnett County Department of authorization shall be valid for	of Public Hea or a period no	Ith, Improvement Permi	it # 22870	This	
This authorization will be in	valid if owne	rship, site plans, or inte	ended use change.		
Brian Tothoson			639-3714 Telephone #		
635 CHESENHALL	RD An	yen N.C.	27501		
Address		O .			
/429 Property Location SR#			Road Name		
			Road Name		
Device Callo	18	3000 3606AD	. 349		
Subdivision		# Bedrooms Proposed	Lot Size		
	700	PE OF SYSTEM			
New Installation [] Rep	oair [JS	eptic Tank [] Ni	trification Lines		
[] Conventional [] Oth	er 25% /	Reduction Syst	~		
[] Basement [] With Plumb	bing []W	ithout Plumbing			
Water Supply: [] Well	[Public W	ater Supply Minimum V	Well Setback:Ft.		
Septic Tank/60 O	gal	Pump Chamber	gal		
NITRIFICATION FIELD SPECIFICATIONS					
Number of fields	# of lines pe	r field 3 Leng	th of lines 30 Ft.		
Width of ditches3	ft. Depth of	ditches 29→18 inch	es		
French Drain: Linear feet requ	ired	Depth of gravel	_		
	7				
No wastewater system shall be Harnett County Health Depart the conditions of the Improver	ment has dete	ermined that the system	has been installed according to	to	
and conditions of the improver	nont i cimit a	ina mai a vana Operano	ons i cititi has been issued.		
Signature of Authorized Agent for H	ant a	was	4-4-06		
Signature of Authorized Agent for H	larnett County		4-4-06 Date		