HTE#06-5-14731

IMPROVEMENT PERMIT 22579

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) Ken Dawson Homes Inc. New Installation & Septic Tank & Repair Property Location: SR# 1707 /eighbors ld Nitrification Line Expansion Subdivision Beanett Place Quadrant # _______Lot Size: 6324c Tax ID# Number of Bedrooms Proposed: 3 (360 cad) Basement with Plumbing:
Garage: Water Supply: Well Public ☐ Community Distance From Well: ft. Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Type of system: \(\subseteq \text{Conventional} \) Other 2573 led set: \(\subseteq \text{Conventional} \) Size of tank: Septic Tank: / gallons Pump Tank: gallons Subsurface exact length width of No. of depth of **B.** of each ditch 80 ft. ditches 3 ft. ditches 18-30 in. Drainage Field ditches French Drain Required: Linear feet Date: PERMIT EXPIRES 5 YEARS FROM ABOVE DATE This permit is subject to revocation if site plans or intended use change. * Man. tin all setback Environmental Health'Specialist * Top Line to be NO DEEPER than 30 into *If needed Set TANK
Shallow so fall can be D

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 # 22577 . 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.
Name Name Telephone #
120 Edmond son Dr. Willow Spring r M. 27582 Address
Property Location SR# Road Name
Bennett Ince 4 3 (360 y,sd) , W2/c Subdivision Lot # Bedrooms Proposed Lot Size
TYPE OF SYSTEM
[New Installation [] Repair [Septic Tank Nitrification Lines
[] Conventional []Other 25 90 Redution
[] 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.
Signature of Authorized Agent for Harnett County Date