HTE# 06-500 14964 HA

IMPROVEMENT PERMIT 23037

construct permit fr	tion of any building at w com the Harnett County	
Name: ((owner) Kinnet	New Installation Septic Tank & Repair
Property Location: SR# 1/25 Nitrification Line Expansion Subdivision Work Work Work Work Work Work Work Work		
Number	of Bedrooms Propos	ed: 3(54x42) 362 spd Lot Size: -36 AC
Baseme	nt with Plumbing:	Garage:
Water S	Supply:	Public Community ft.
Distanc	e From Well:	50 ft.
	ng is the minimum s to final approval.	pecifications for sewage disposal system on above captioned property.
Type of	System: Conve	intional St Other Purpt Conventional
Size of	tank: Septic Tank: 1	gallons Pump Tank: 1000 gallons
Subsurface No. of exact length width of the depth of the ditches ft. of each ditch 200 ft. ditches ft. depth of ditches in.		
French	Drain Required:	Linear feet Date: 06-06-06
This pe	rmit is subject to rev	ocation if site PERMIT EXPIRES 5 YEARS FROM ABOVE DATE
plans o	meet onsite	Signed:Signed:Signed:Signed:Signed:Signed:Signed:
-		
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d	65	54 x42 Repair 90°
90	DRIVE	5 7
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	+ 25 FAXMENT	
	. 0	OI I challed when the war and
	574B 0	Plumbing shallow where shown and
Purp may not be Reguracd. Maintain all set Bach.		Not be Keguiraca. Millin Hin All Sci Office
	Keep septice	system do from propured Line with LASERLES MISE

AT THORIZATION TO COL TRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by authorization shall be valid for a period not to great 15 (5)
This authorization will be invalid if ownership, site plans, or intended use of issuance.
Name Telephone #
Address
Property Location SR#
Road Name Road Name Subdivision Lot # Bedrooms Proposed Road Name Road Name Road Name Lot Size
TYPE OF SYSTEM
New Installation [] Repair Septic Tank Nitrification Lines [] Conventional Other Pump To
[] Conventional Cother Fund To
[] Basement [] With Plumbing [] Without Plumbing
Water Supply: [] Well Public Water Supply Minimum Well Setback: 50
Septic Tank gal Pump Chamber gal gal
NITRIFICATION FIELD SPECIFICATIONS
Number of fields # of lines per field
Width of ditches ft. Depth of ditches Ft.
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
Signature of Authorized Agent for Harnett County Date