HTE# 06-500 15395

IMPROVEMENT PERMIT 23043

construction of permit from t	of any building at w he Harnett County	arnett County Board of which a septic tank syst Health Department."	em is to be used	d for disposa	l of sewage v	vithout fir	st obtaining a written
Name: (own	ier) DAM	Morris (Brick	Bulden) Nev	v Installatio	on 🗗 Sep	tic Tank	Repair 🗖
Property Loc Subdivision Tax ID# Number of I Basement w Water Supp Distance Fro Following in Subject to f	Bedrooms Propositith Plumbing: Wellom Well: s the minimum final approval.	Sed: 3(56 x 36) Garage: Public ft. specifications for so	Community	Lot S	Quadrantize:	Expa Lot # t # 3 G / (nsion
Type of syst	tem: 🗗 Conv	entional	er				_
Size of tank	: Septic Tank:	JS27 gallons	Pump Ta	nk:	gallo	ns	
Subsurface Drainage Fi	No. of eld ditches	exact len	igth ditch <u></u>	width _ft. ditche	of es	de _ft. di	pth of tches 1824 in.
French Drai	n Required:	Linear fe	et	ate: 07	21.20	7	
-	t is subject to re tended use chan	vocation if site ge.		PERMIT EX	(PIRES 5 YI	EARS FR	om ABOVE DATE
Shikar Dave 84	Ho W/	JBR SUND	-D		Lev Pyrn Cv	109	Stylow Shallow Maintain All set Back
			145		,1		

HARNETT COUNTY DEPARTMENT OF PUBLIC HEALTH AUTHORIZATION TO CONSTRUCT

Harnett County Department of Public Health, Improvement Permit # 23043. 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.
DAM, Name) Brisse Bulder)
Name / Telephone #
Address
1108
Property Location SR# Road Name
Yorkshire Plantation 171 3(56x7c) 7(sp.) 7(sp.) Subdivision Lot # # Bedrooms Proposed Lot Size
TYPE OF SYSTEM
New Installation [] Repair Septic Tank Nitrification Lines
Conventional [] Other
[] 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 /PLY 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.
Joe Wet RS 7.21.36
ignature of Authorized Agent for Harnett County Date