HTE# 06-5-1554

IMPROVEMENT PERMIT 23130

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) Fanjoy Custon Homes INC Property Location: SR# 401 N Subdivision Share a 1 27 th 5
Property Location: SR# 401 N Nitrification Line Expansion
Duti In Inc.
Tax ID# Quadrant #
Number of Bedrooms Proposed: 4806Pb Lot Size: .59
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: Conventional Other 15% Reduction Repair
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 100 ft. ditches 3 ft. ditches 20 7/8 in.
French Drain Required:Linear feet
This permit is subject to revocation if site plans or intended use change. Date: $\frac{\beta^{2} - 24 - 00}{24 - 00}$ PERMIT EXPIRES 5 YEARS FROM ABOVE DATE
Signed: Environmental Health Specialist
Cui de 75% and 15% and

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 #	is
FANJOY Custon Homes, UC 919-552-8085 Telephone # 109 Faraground RD Holly Sprigs D.C. 27540	
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You State of the S	
SHERMAN PENES 10 4BR 480GPD 155	
ubdivision Lot # # Bedrooms Proposed Lot Size	
TYPE OF SYSTEM	
New Installation [] Repair [Septic Tank [Nitrification Lines	
Conventional [+Other 25% Reduction Systate	
Basement [] With Plumbing [] Without Plumbing	
Vater Supply: [] Well [Public Water Supply Minimum Well Setback:Ft.	
eptic Tank gal Pump Chamber gal	
NITRIFICATION FIELD SPECIFICATIONS	
umber of fields # of lines per field 3 Length of lines Ft.	
ridth of ditches ft. Depth of ditches inches	
rench Drain: Linear feet required Depth of gravel	
o wastewater system shall be covered or placed into use by any person until an inspection by the arnett County Health Department has determined that the system has been installed according to e conditions of the Improvement Permit and that a valid Operations Permit has been issued.	
yardure of Authorized Agent for Harnett County Date	