HARN COUNTY HEALTH DEPARTMENT

IMPROVEMENT PERMIT

Nº 18264 1-5-1424

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) DAMY MORRIS	New Installation Septic Tank
Property Location: SR#	Repairs Nitrification Line
Subdivision CRESTUCL EST.	Lot #_ 26
Tax ID #	Quadrant #
Tax ID #Number of Bedrooms Proposed: 3 (36 x 68) Lor	t Size: 43AC
Basement with Plumbing: Garage:	STUB Out Plumbing high
Water Supply: Well Public Community	where Shown I we may
Distance From Well: ft. Bc Able To	get out of a pump Meetons.
Following is the minimum specifications for sewage disposal syste	em on above captioned property. Subject to
final approval. Type of system: Conventional Other	o To conventional
Size of tank: Septic Tank: gallons Pur	
Subsurface No. of ditches exact length of each ditch ft.	width of 3 depth of 18 in.
French Drain Required: Linear feet	
Date: O	3-13-01
This permit is subject to revocation if site plans or intended use change. Signed:	Ja Wall
plans of intended use change.	Environmental Health Specialist
30, 1	Meet Onsite 4 may Be able To get Out of a pump
Maintain All sit Britis Or Mark on Septic System	

HA ETT COUNTY HEALTH DEPAI LENT AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater sy by Harnett County Health Department Improvement Permit # shall be valid for a period not to exceed five (5) years from the dat will be invalid if ownership, site plans, or intended use change.	8264 . This authorization	
Owner or Authorized Agent DANN MORRI)	9	
Name:		
Address:		
Property Location: SR # Road Name		
New Installation		
Number of Bedrooms Proposed: 3(36x68) Lot size: - 43 AC		
Basement With Plumbing Without Plumbing	umbing	
Water Supply: Well Public Minimum Well Setback: ft.		
Type of System: Conventional Other		
Tank Volume: Septic Tank 100 gallons Pump Chamber 200 gallons		
Nitrification Field Specifications		
Number of fields Number of Lines per Field Length of lines		
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.		
Authorized Agent for Harnett County Health Department Name: Date:	07-13-01	
(Revised 2/96)CNSTRCT.WPD		