01-5-2178

## HARN COUNTY HEALTH DEPARTMI

Nº 18561

## **IMPROVEMENT PERMIT**

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."

from the Harnett Cour	ity meanin beparin	ient.			
Name: (owner) R.L. PROPERTIES				w Installation	Septic Tank
Property Location:	SR# 1666	OLD STAGER	Rep	pairs	Nitrification Lin
Subdivision Wyn	IN RIOGE			Lot	# 8
Tax ID #			Ona	drant #	
Number of Bedroom	ns Proposed:	3	Lot Size:	.63 AC	
Basement with Plum	nbing:	Gara	ge: 🔲		
Water Supply:	Well Put	olic 🔲 Com	munity		
Distance From Well:	100	ft.			
Following is the mini	mum specificatio	ns for sewage dis	posal system on ab	ove captioned	property. Subject to
final approval.	,				
Type of system:			r		
Size of tank:				1970	
Subsurface Drainage Field	ditches 2	of each ditch	80 ft. ditches	d 3 ft. d	epth of in
French Drain Requir		Linear feet			
		Г	Date: 7/3/01		Ken 8.7.0
This permit is subje		if site S	igned:	Contactor	2742
plans or intended u	se change.	-	145 Envir	onmental Hea	lth Specialist
* MAINTAIN A	LL SETBACKS		Contract of the Contract of th		
* INSTALL FR	ENCH DONIN		ULTR	A SHALLOW	
1242 PAGE	CONNECT		In nov	LATIVE REALIZ	
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## RNETT COUNTY HEALTH DE TIMENT AU . HORIZATION TO CC. STRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department Improvement Permit # 1856 . 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. Owner or Authorized Agent R. L. Page ERTICS Telephone # 639-4245 Address: 4590 OLD BUIES CREEK RD ANGIER 27501 Property Location: SR # 1006 Road Name OLD STAGE RO New Installation Repair Septic Tank Nitrification Lines Subdivision WWW RIDGE Lot # 8 Number of Bedrooms Proposed: 3 Lot size: 63AC Basement \_\_\_\_\_ With Plumbing \_\_\_\_ Without Plumbing \_\_\_\_ Water Supply: Well \_\_\_\_\_ Public \_\_\_\_ Minimum Well Setback: \_ 100 ft. Type of System: Conventional \_\_\_\_ Other \_\_\_\_ Tank Volume: Septic Tank 1000 gallons Pump Chamber \_\_\_\_\_ gallons **Nitrification Field Specifications** Number of fields \_\_\_\_\_ Number of Lines per Field \_\_\_\_ Length of lines \_\_\_\_ 80 Width of ditches \_\_\_\_\_ ft. Depth of ditches \_\_\_\_ inches French Drain: Linear feet required 150 Depth of gravel 36" 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 Date: 7/3/01

(Revised 2/96)CNSTRCT.WPD