## HARNETT COUNTY HEALTH DEPARTMENT

Nº 18469

## **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."

Name: (owner) Toyce & Young OBA Br Estates  Property Location: SR# 1563 Bill Average  Repairs  New Installation  Repairs  Nitrification Line
Subdivision Beichfield Lot # 42
Tax ID # Quadrant #
Number of Bedrooms Proposed: 3 Lot Size: 9,615
Basement with Plumbing: Garage:   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:  Other  Other
Size of tank: Septic Tank: 1000 gallons Pump Tank: gallons
Subsurface No. of exact length width of depth of Drainage Field ditches Z of each ditch 100 ft. ditches 3 ft. ditches 18-24 in.
French Drain Required: Linear feet
This permit is subject to revocation if site plans or intended use change.  Signed: James & Manhauf Wals.  Environmental Health Specialist  *Maintai all Schooles  *Health Specialist  *Maintai all Schooles  Before Monhauf Wals.  *Before
Tout 1881 Homes - Part Con Repaire Standy RTD6E Prop

#01-5-2352

## AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department Improvement Permit # 18469 . 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.

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Owner or Authorized Agent
Name: Joyce B Young DBA BF Estates Telephone # 919-635-2534
Address: 3485 Johnston Co Rol Angier N.C. 27501
Property Location: SR # Road Name
Property Location: SR # Road Name
Subdivision Buckfield Lot # 47
Number of Bedrooms Proposed:
Basement With Plumbing Without Plumbing
Water Supply: Well Public Minimum Well Setback: 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
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: Samos E Markart Russ.  Date:  Revised 2/96)cnstrct.wpd
Revised 2/96)cnstrct.wpd