HARNE COUNTY HEALTH DEPARTMEN

J № 18478

#01-5-2484

## **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 County Health Department."		
Name: (owner) CHR Buildly		
Property Location: SR# 1443 Labout HE	Repairs	Nitrification Line
Subdivision_VIctorio Hills I	Lot :	# 210
Tax ID #	Ouadrant #	
Number of Bedrooms Proposed:	Lot Size:	7
Basement with Plumbing: Garage:		
Water Supply:  Well Public  Commu	anity	
Distance From Well: ft.		
Size of tank: Septic Tank: 1000 gallons	Pump Tank: gall	ons
Size of tank: Septic Tank: 1000 gallons  Subsurface No. of exact length ditches 3 of each ditch	width of de ft. ditches ft. dit	pth of ches 16-18 in.
French Drain Required: Linear feet		
Date	e: 8-3-01	
This permit is subject to revocation if site plans or intended use change.	ned: Tenvironmental Health	and some
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Mooney Drive	Stellas The last	
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## AULIORIZATION TO CONSTRUCT

Owner or Authorized Agent
Name: CHR Bulders Telephone # 9/9-721 -0764
Address: P.O. Box 1465 DUNN N.C. 28335
Property Location: SR # 1443 Road Name Lafagett 6
New Installation Repair Septic Tank Nitrification Lines
Subdivision Victoria Hills # Lot # 710
Number of Bedrooms Proposed: 3 Lot size: 32,000 35
Basement With Plumbing Without Plumbing
Water Supply: Well Public Minimum Well Setback: _507 ft.
Type of System: Conventional Other
Tank Volume: Septic Tank 1000 gallons Pump Chamber gallons
Nitrification Field Specifications
Number of fields 2 Number of Lines per Field 3 Length of lines 115
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: Markatan Date: 8-3-01  (Revised 2/96) CNSTRCT WPD
(Revised 2/96) CNSTRCT WPD