HARNET

01-5-2629 **OUNTY HEALTH DEPARTMEN**

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

Line		
Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Type of system: Conventional Other EFF-ZZZ LAG TWWS-55-37 Size of tank: Septic Tank: 1000 gallons Pump Tank: gallons		
This permit is subject to revocation if site plans or intended use change. Date: 8-7-01 Signed: Signed: Environmental Health Specialist		
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4)		

HARNETT COUNTY HEALTH DEPARTMENT#01-5-2629 AU IORIZATION TO C(STRUCT

Owner or Authorized Agent /	Casey
	Telephone # <u>639-240</u> Z
<i>y</i>	ex N.C. 27501
	Road Name Olis Buies Cuple
New Installation Repair	Septic Tank Nitrification Lines
Subdivision _ Sandy Conorc	Lot # 20
Number of Bedrooms Proposed: 3	
Basement With Plumbing	Without Plumbing
Water Supply: Well Public	Minimum Well Setback: 50 ft.
Type of System: Conventional O	ther bbbs vorlay
Tank Volume: Septic Tank _/000 gallo	ons Pump Chamber gallons
Nitrification	on Field Specifications
Number of fields Number of Lines	per Field3 Length of lines75
Width of ditches3 ft. Depth of dit	ches <u>24-17</u> inches
French Drain: Linear feet required	Depth of gravel
Harnett County Health Department has deter	ced into use by any person until an inspection by the mined that the system has been installed according to I that a valid operations permit has been issued.
Authorized Agent for Harnett County Health	Department
Name: games Emphases	Date: 87-0
(Revised 2/96)cnstrct wpp	