## HARN COUNTY HEALTH DEPARTME

IMPROVEMENT PERMIT ()1-5-3264

No 18946

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." OHOCC New Installation Name: (owner) Septic Tank Property Location: SR# Nitrification Line Repairs Subdivision STAR WOOD Lot # XO Tax ID #\_ \_\_\_\_\_ Quadrant # \_\_\_\_ Number of Bedrooms Proposed: 3 Lot Size: NOTE Changes In how bration Basement with Plumbing: Garage: Water Supply: ☐ Well Public/ Community of home is not where it is shown Distance From Well: Permit, Permit is VOID This Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Other Kurpto Conventional Type of system: Conventional Pump Tank: 1000 gallons Septic Tank: 1000 gallons Size of tank: Subsurface exact length of each ditch ft. width of depth of ditches ft. ditches ft. ditches ft. No. of Drainage Field ditches French Drain Required: \_\_\_\_\_ Linear feet Date: This permit is subject to revocation if site Signed: \_ plans or intended use change. 135 Environmental Health Specialist ()など PRETRIATION TO LPP + Onsite Before Installing Must Bair In 8 to 12" of cover Maintain All Schrack

## ARNETT COUNTY HEALTH DEPAR' NT AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department, Improvement Permit # 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.
STAFFORD Land Co 910-692-9808  Name Telephone #
780 - ANW Broad ST. So-theen Pinci NC
NC 87 - Royal A boot Pol
Property Location SR# Road Name
Property Location SR#  Stac wood at 0 Verh. 11s 77 3(30 x 42) 753 ac  Subdivision  Lot # Bedrooms Proposed Lot size
Subdivision Lot # # Bedrooms Proposed Lot size
TYPE OF SYSTEM
New Installation [ ] Repair [ Septic Tank [ Nitrificiation Lines
[] Conventional Other Rup to Conv. [] Basement [] With Plumbing [] Without Plumbing
Water Supply: [ ] Well [ Public - Minimum Well Setback: 50 Ft.
NITRIFICATION FIELD SPECIFICATIONS
Number of fields # of lines per field Length of lines 100 Ft.
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.
On With 11-26-01

Date

Signature of Authorized Agent for Harnett County