## HARNI COUNTY HEALTH DEPARTME

01-5-3370 Nº 18627

## **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."

	inty Health Department."			/	
Name: (owner) Paywor Builden				New Installation Septic Tank	
Property Location:	SR# 1456 Hz/hz	and	•	Repairs	Nitrification Lin
Subdivision Cal	VINS Place			Lot	# 26
Tax ID #			-	Ouadrant #	
Number of Bedroo	ms Proposed:	3	Lot Siz	e:574	
Basement with Plu	mbing:	Garage:			
Water Supply:	Well Public	Commu	nity		
Distance From Wel	l:ft.				
final approval.	Conventional				
Size of tank:	The second secon				
Subsurface Drainage Field	No. of ditches of				
	ired:				
		Date	:	11-16-01	
This permit is sub plans or intended	ject to revocation if si	te Sign	ed:	mes & Mar	hand somes.
plans of intended	use change.		/ 1	Environmental Hea	lth Specialist
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## ARNETT COUNTY HEALTH DEPART TAUTHORIZATION 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.						
Parisa Builla		639	2011			
Name /		Telephone	#			
Raya on Builders Name P.O. BOX 846 An Address	ogien N	).C. 2750Z				
1456 Property Location SR#		Hallamel Road Name				
Coloress Place	26	3	1574			
CALVENS PLACE Subdivision	Lot#	# Bedrooms Proposed	Lot size			
TYPE OF SYSTEM  [ New Installation [ ] Repair [   Septic Tank [   Nitrificiation Lines						
[ ] Conventional Other [ ]Basement [ ]With Plumbing [ ] Without Plumbing						
Water Supply: [ ] Well [   Public - Minimum Well Setback:Ft.						
NITRIFICATION FIELD SPECIFICATIONS						
Number of fields 2 # of lines per field 4 Length of lines 75 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.						
Signature of Authorized Agent for Harnett Co	ounty	( <b>0</b> -[6-0] Date				