#11-5-3328

## HARNE

## COUNTY HEALTH DEPARTME

Nº 18619

## **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) Raymon Purperts (5) Property Location: SR# 1456 Hs 1456	
Property Location: SR# 145@ HI III AND	Repairs
Subdivision Calvins Place	Lot #_ 2
Tax ID #	Ouadrant #
Number of Bedrooms Proposed:	Lot Size: 579
Basement with Plumbing: Garage:	
Water Supply: Well Public Communication Well: ft.	nity
Following is the minimum specifications for sewage disposational approval.	
Type of system: Conventional Other	
Size of tank: Septic Tank: 1000 gallons  Subsurface No. of exact length Drainage Field ditches 3 of each ditch	
French Drain Required: Linear feet	11-15-0
This permit is subject to revocation if site plans or intended use change.  Signature of the plans of intended use change.	Environmental Health Specialist  * Maintain all Sethooles  * System may NEED  ANOTH FR LINK Added  AT INSpection Depart  on Sail.

## RNETT COUNTY HEALTH DEPARTM AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by						
Harnett County Health Department, Improvement Permit # 18619. 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.						
RALLING Pro	pertie		635-	2011		
Name /		635-2011 Telephone #				
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1456			Hz	11smel		
Property Location SR#		HILIIANO Road Name				
Color De Dla	-6	7	7	1574		
Calvers Pla Subdivision	<u>u</u>	Lot#	# Bedrooms Proposed	Lot size		
	Try	THE OF EVE	NEW W.			
	11	(PE OF SYST	EN			
-		-				
New Installation	Repair   Septic T	ank [   Nitri	ficiation Lines			
[ Conventional Other		I IDanamant I	With Disseline	With and Direction		
[7] Conventional Other		jbasement	wan rumbing [	Wunout Plumbing		
			!			
Water Supply: [ ] Well [ Public - Minimum Well Setback: 50 Ft.						
NITRIFICATION FIELD SPECIFICATIONS						
MIRIFICATION FIELD SPECIFICATIONS						
Number of fields # of lines per field Length of lines Ft.						
Width of ditchesft. Depth of ditchesft. Depth of ditches						
Width of diteres	n. Depin of the	113 10	incues	*		
French Drain: Linear feet required Depth of gravel						
No wastewater	system shall be co	overed or pla	ced 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.						
The operations a continuo occir toucos.						
0. 5-	Mala for	B	11-15-07			
Signature of Authorized Ag	gent for Harnett County		Date	-		
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