# 01-5-3

HARNE

## COUNTY HEALTH DEPARTME

Nº 18761

## **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) <u>RAYNON Properties</u>	New Installation Septic Tank
Property Location: SR# 1456 Helliand	
***************************************	
Subdivision Calvans Place	Lot #//
Tax ID #	Quadrant #
Number of Bedrooms Proposed:3	Lot Size:
Basement with Plumbing:   Gar	rage:
Water Supply:  Well  Public  Cor	mmunity
Distance From Well:ft.	
final approval.	isposal system on above captioned property. Subject to
Type of system:	er FEE-777 LAY INWS-55-311
Size of tank: Septic Tank: 1000 gallons	Pump Tank: gallons
Subsurface No. of exact length of each ditch	width of depth of ditches 3 ft. ditches in.
French Drain Required: Linear fee	
	Date:/-23-07
This permit is subject to revocation if site	Signed: James [Minhauforos
plans or intended use change.	© Environmental Health Specialist
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## RNETT COUNTY HEALTH DEPARTM AU THORIZATION TO CONSTRUCT

Harnett County Health Department,	truct a wastev Improvement	vater system to the specificate Permit # 107/1	ntions described by	
authorization shall be valid for a peri-	od not to exce	ed five (5) years from the d	ate of issuance	
This authorization will be invalid if ow	nership, site p	lans, or intended use change		
RAYNOR Properties		435-	2611	
RAYNOR Properties Name  P.O. BOX 846 Angle Address		6 35- 2611 Telephone #		
PD BOY SUL A		7757		
Address	ex 1	).C. 200 E		
			0	
Property Location SR#		Road Name		
Codine Place				
Subdivision Place	Lot #	# Bedrooms Proposed	Lot size	
			Dot Size	
	TYPE OF S	SYSTEM		
[ New Installation [ ] Repair [ ] Septic Tank [ ] Nitrification Lines				
[Tonventional Other FEEF-7771 AY JUWS-95-38.				
Basement [ ] With Plumbing [ ] Without Plumbing				
, , , , , , , , , , , , , , , , , , , ,	[ ]	anionig .	1	
Water Supply: [ ] Well [ Tublic - Minimum Well Setback:Ft.				
NITRIFICATION FIELD SPECIFICATIONS				
Number of fields 2 # of lines per field 3 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	
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.				
Sm. 48	res			
Signature of Authorized Agent for Harnett Count	v	1-73-02		
Agait for namen country	У	Date		