HARN 'COUNTY HEALTH DEPARTME

№ 18632

#01-5-3346

## 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) Rayson Properties	New Installation Septic Tank
Property Location: SR# 1456   12 Iltrand	
Subdivision CALVINS PLACE	Lot #_ 21
Tax ID #	Ouadrant #
Number of Bedrooms Proposed: 3	Lot Size: 61
Basement with Plumbing: Garage: [	
Water Supply:  Well Public  Community	
Distance From Well:ft.	
Following is the minimum specifications for sewage disposal s final approval.	
Size of tank: Septic Tank: 1000 gallons	
Subsurface No. of ditches 3 exact length of each ditch	width of depth of ft. ditches 8 20 in.
French Drain Required: Linear feet	
	11-16-01
This permit is subject to revocation if site plans or intended use change.  Signed:	Environmental Health Specialist
pains of interiord use change.	Environmental Health Specialist
F E A	
2.	
to	
The wedge	
Ango Hon	
tone of	
ME Conference Conferen	
200	
William I to company of the standard of the st	

## AN THORIZATION TO CONSTACT

Authorization is hereby given to construct a wastewater system to the specifications described by				
Harnett County Health Department, Improvement Permit # 18632. 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.				
Rayson Property	ie-		639-7011	
Name		<del></del>	Telephone #	
00 000 500	n .	41 0	27.6	
RAYNOR Properties Name P.D. BOX 846 Address	trgies	N.C.	21802	
145% Property Location SR#		·	HI/HARE	
Subdivision	21	3	,61	
Subdivision	Lot #	# Bedrooms Pro	posed Lot size	
TYPE OF SYSTEM				
		2 23172	9	
[ ] New Installation [ ] Repair [	/ /			
[ ] New Installation [ ] Repair [	Septic Tank [ Nitr	ificiation Lines		
			-	
Conventional Other	Basement	With Plumb	ing     Without Plumbing	
Water Supply: [ ] Well [ Public - Minimum Well Setback: 50   Ft.				
NITR.	RIFICATION FIELD S	PECIFICATIO	NS	
.*				
Number of fields # of lines per field Length of lines for Ft.				
Width of ditches 3 ft. Depth of ditches 18-20 inches				
Width of ditches it. Depth of ditches inches				
			· · · · ·	
French Drain: Linear feet required Depth of gravel				
No wastewater system she	all be covered or n	aced into us	e 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.				
vand Operations I clinic has been issued.				
	an rest			
Signature of Authorized Agent for Harnett	fells.	11-11	a 1	
Signature of Authorized Agent for Harnett	County	Date	<i>U.</i> 1	