HARNE COUNTY HEALTH DEPARTME

IMPROVEMENT PERMIT

№ 18935 71-5-3353

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." New Installation Septic Tank Name: (owner) Property Location: SR#_ Nitrification Line Repairs ____ Lot # 28 Subdivision >/ Tax ID #___ _____ Ouadrant # ____ Number of Bedrooms Proposed: 34 (63 x57) _ Lot Size: _ 4 Ac Basement with Plumbing: Garage: Water Supply: Well Public Community Distance From Well: Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Type of system: Conventional Other Septic Tank: /000 gallons ____ Pump Tank: ____ gallons Size of tank: Subsurface exact length of each ditch width of depth of ditches ft. Drainage Field ditches Please note AREA where Fill is present Lines French Drain Required: -___ Linear feet BOC Below f.11 Date: _ This permit is subject to revocation if site Signed: ____ plans or intended use change. Environmental Health Specialist NATURAL Murment onsite 100 DRIVE 19 Bottoms mw7 Be 24" Below the fill nections, te Before Installing 10+ DRIVE OR PARK ON SEPTIC SYS

HARNETT COUNTY HEALTH DEPAI ENT AUTHORIZATION TO CONS....UCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department, Improvement Permit # 18935. This authorization shall be valid for a period not to exceed five (5) years from the date of issuance.		
Name RAJS Built Homes Rame 2118 Pinchood Teer Fry	864-1253	
Name	Telephone #	‡
2118 Pine Wood /cer TA	NC	
Address		
1/20		
Property Location SR#	Road Name	
Sone CROSS 28	4(63x57)	· 4 10
Subdivision Lot #	# Bedrooms Proposed	Lot size
TYPE OF S	<u>YSTEM</u>	1
	a	
New Installation [] Repair Septic Tank Nitrificiation Lines		
		1
Conventional Other [] Basement [] With Plumbing [] Without Plumbing		
Water Supply: [] Well Public - Minimum Well Se	etback: 50 Ft.	
NITRIFICATION FIELD	SPECIFICATIONS	
. 11		7. 2
Number of fields # of lines per field	Langth of lines	74
/ William per new	_ Length of files F	
Width of ditchesft. Depth of ditches	14	
with of ditches it. Depth of ditches	inches	
	a mark	
French Drain: Linear feet required Depth of	gravel	
N. T.		
No wastewater system shall be covered or		
inspection by the Harnett County Health De has been installed according to the condition	partment has determine	d that the system
valid Operations Perm		cimit and that a
- and Operations I till	it has been assucu.	
Oo Like ton)	11-14-01	
Signature of Authorized Agent for Harnett County	Date	