HARNE COUNTY HEALTH DEPARTMEN

01 - 5 - 3371 Nº 18644

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) Victor R Bernett Va New Installation Septic Tank
Property Location: SR# 1415 Pauls Church Repairs Nitrification Line
Subdivision Lot #_ Z
Tax ID # Quadrant #
Number of Bedrooms Proposed: Lot Size:
Basement with Plumbing: Garage:
Water Supply:
Distance From Well: ft.
Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval.
Type of system: Conventional Other
Size of tank: Septic Tank: gallons Pump Tank: gallons
Subsurface No. of exact length width of depth of of each ditches of each ditches ft. ditches ft. ditches ft.
French Drain Required: Linear feet
This permit is subject to revocation if site plans or intended use change. Date: 12-17-01 Signed:
*Maintain all 1 Setbooks a
STUB Plumbing out High to Accommodate
Shallow TANK Placement
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RNETT COUNTY HEALTH DEPARTM THORIZATION TO CONSTITUTE TO THE PROPERTY OF THE P

Harnett County Health Department, Improvement Permit # 18644 . 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.				
Name Name 114 5 FNNIS 57 F. Address	N.C.	Telephone	#	
Property Location SR#	Road Name Z Bedrooms Proposed Lot size			
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: 507 Ft.				
NITRIFICATION FIELD SPECIFICATIONS				
Number of fields 2 # of lines per field \(\sum_{\text{Length of lines}} \) Ft.				
Width of ditches				
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.				
James & Manhan Lang 12-17-01				
Signature of Authorized Agent for Harnett Cour	nty	Date		