#01-5-368P

ARN 'COUNTY HEALTH DEPARTME

## **IMPROVEMENT PERMIT**

Nº 18752

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."

from the Harnett County Health Department."
Name: (owner) Chary Matthews Realty New Installation Septic Tank
Name: (owner) Chary Matthews Realty  Property Location: SR# 7003 McLamb  New Installation  Repairs  Nitrification Line
Subdivision Clay for Downs Lot #_//  Tax ID # Quadrant #  Number of Bedrooms Proposed: 3 Lot Size: 73
Tax ID # Quadrant #
Number of Bedrooms Proposed:
Basement with Plumbing: Garage:
Water Supply:   Well  Public   Community
Distance From Well:ft.
Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval.
Type of system:
Size of tank: Septic Tank: gallons Pump Tank: gallons
Subsurface No. of depth of ditches   No. of depth of ditches   Subsurface   No. of depth of ditches   No. of
French Drain Required: Linear feet
Date:
This permit is subject to revocation if site plans or intended use change.  Signed:
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STREET HALL

## THORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department, Improvement Permit #
Name Realty 857-5676  Telephone #  Address  N.C.
Property Location SR#  Road Name
Clayfor Downes // 3 .73
TYPE OF SYSTEM
[ New Installation [ ] Repair [   Septic Tank   Nitrificiation Lines
[   Conventional Other [ ] Basement [ ] With Plumbing [ ] Without Plumbing
Water Supply: [ ] Well [ ] Public - Minimum Well Setback:Ft.
NITRIFICATION FIELD SPECIFICATIONS
Number of fields # of lines per field Length of lines/15 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 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.
ignature of Authorized Agent for Harnett County  Date