## IMPROVEMENT PERMITOR-5-3971

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) Bass Built Homes	■ New Installation	☐ Septic Tank
Property Location: SR#	☐ Repairs	☐ Nitrification Lin
Subdivision STONE CROSS	Lot	# 7
Number of Bedrooms Proposed: 3 (53 × 5 8) Lo	ot Size: YAC	
Basement with Plumbing: Garage:	NOTE This site 3 BED ROOMS	is Limited To
Water Supply:  Well Public  Community	3 BED ROOMS	
Distance From Well:ft.		
Following is the minimum specifications for sewage disposal sys	tem on above captioned j	property. Subject to
Type of system: Conventional Other		
Size of tank: Septic Tank: 1000 gallons Pu		lana
Bunous 1		
Subsurface No. of exact length of each ditch	ditches ft. di	tches 18 in.
French Drain Required: Linear feet		
Date:	5-6-02	
This permit is subject to revocation if site plans or intended use change.  Signed:		
	/ Environmental Heal	th Specialist
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STUB Out Plumbing shallow w	here s roun-	,
Meet Daste - 18" max Ottch Dr	Mul - follom co	A)
My FIAS - Do not Dave Dap	Aak on stote	system
1119 + 148 - P2 1101 Dags Ore 1	IN. C. C. L. S. d.	0

## HARNETT COUNTY HEALTH DEPAR **AUTHORIZATION TO CONSTRUCT**

Authorization is hereby given Harnett County Health Depar	rtment, Improvemen	t Permit # 18 13	. This	
authorization shall be valid for This authorization will be inva-	r a period not to exc lid if ownership, site	eed five (5) years from the da plans, or intended use change	ite of issuance.	
BAN Built			64-1253	
Name		Telephone	#	
	****		9	
Address		3		
Property Location SR#		Road Nam	e	
STOM CROSS	7	3(53×53)	Val	
Subdivision	Lot #	# Bedrooms Proposed	Lot size	
	TYPE OF	SYSTEM		
New Installation [ ] Repair   Septic Tank   Nitrification 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 Ft.				
Thumber of fields # of fines per field   Length of lines   Ft.				
Width of ditches ft. Depth of ditches inches				
French Drain: Linear feet required Depth of gravel				
No				
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.				
	2 1			
Le WOY	Y	3-6-02		
Signature of Authorized Agent for Harr	nett County	Date		

Date