OUNTY HEALTH DEPARTMEN HARNET

Nº 18726

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 Personts at "

from the Harnett County Health Department."				
Name: (owner) Kent Pierce	New Installation Septic Tank			
Property Location: SR#	☐ Repairs ☐ Nitrification Line			
Subdivision Peach Tree Crossing				
Tax ID #	Quadrant #			
Number of Bedrooms Proposed: 3 (35 x 44) Lot	Size: • 537 AC			
Basement with Plumbing: Garage:				
Water Supply:				
Distance From Well: ft.				
Following is the minimum specifications for sewage disposal syste	em on above captioned property. Subject to			
final approval. Type of system: Conventional Other				
Size of tank: Septic Tank: Ooo gallons Pur				
Subsurface No. of exact length of each ditches ft.	ditches 3 ft. ditches 8-24 in.			
French Drain Required: Linear feet				
Date: 01-26-02				
This permit is subject to revocation if site Signed: Signed:				
plans or intended use change.	Environmental Health Specialist			
	CONV. RIPAIR			
30'	124'			
	10			
35 X44 P				
d 45' 3 3BR	10			
30')—			
DRIVE				
31				
213				
	0'=20' Ath Onthe monta			
STUB out Plumbing shallow - 1	8 90 DIEN DOWN THEN THE			
All set Oacks - Do not Drive or PA	ek onseptic system.			
STUB Plumbing where shown or pump may be required				

RNETT COUNTY HEALTH DEPARTM AUTHORIZATION TO CONSTI

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department, Improvement Permit # 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.				
	wnersnip, sue p			
Name Pizzic		42 4- 12 9 4 Telephone #		
Address				
1115				
Property Location SR#	~~	Road Name		
PLACK TREE	37		,537AC	
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: 55 Ft.				
NITRIFICATION FIELD SPECIFICATIONS				
,	/	n		
Number of fields # of lines per field Length of lines Ft.				
7 18 24				
Width of ditches $\frac{180}{100}$ ft. Depth of ditches $\frac{180}{100}$ inches				
French Drain: Linear feet required	Depth	of gravel		
No wastewater eystem shall	he coveted o	r placed into use by an	y 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.				
(LAA)		2-26.02		
Signature of Authorized Agent for Harnett C	County	Date	-	