

03-5-5230

HARNETT COUNTY HEALTH DEPARTMENT

No 19557

IMPROVEMENT PERMIT

03-5-5230

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) BAD Built Home  New Installation  Septic Tank  
Property Location: SR# 1120  Repairs  Nitrification Line

Subdivision STONE CROSS Lot # 21

Tax ID # \_\_\_\_\_ Quadrant # \_\_\_\_\_

Number of Bedrooms Proposed: 4 (53x35) Lot Size: .4 AC

Basement with Plumbing:  Garage:

Water Supply:  Well  Public  Community

Distance From Well: 50 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: 1000 gallons Pump Tank: \_\_\_\_\_ gallons

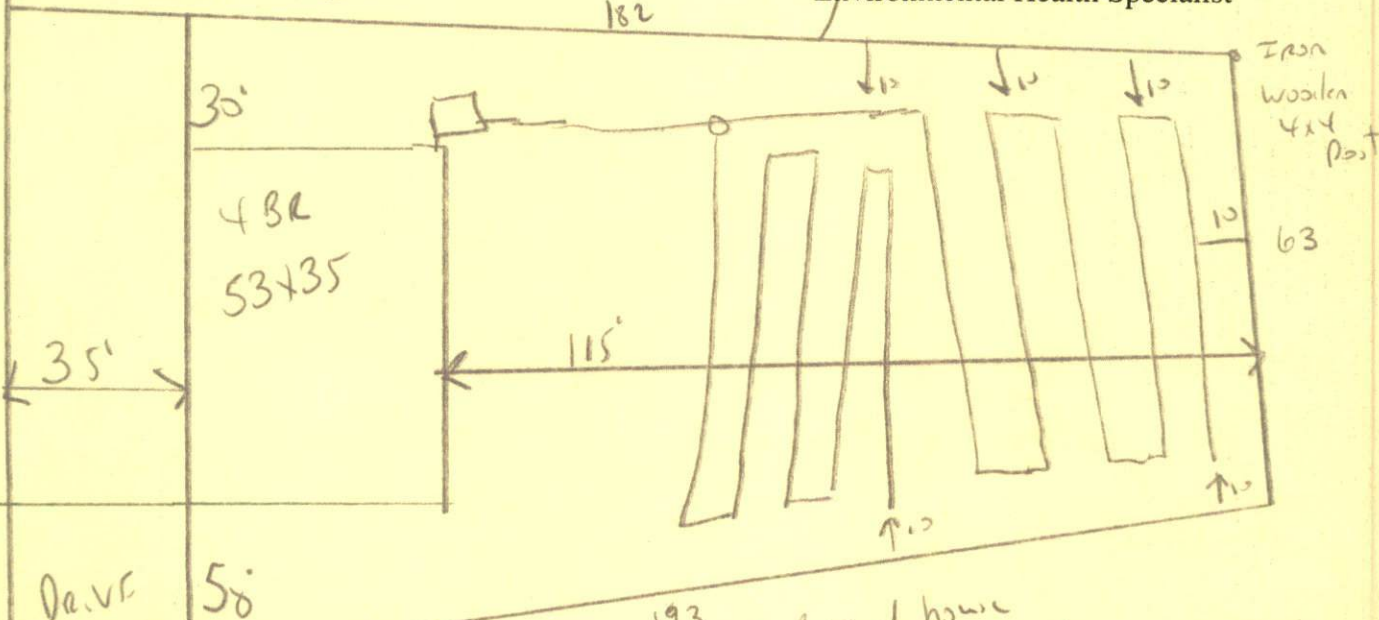
Subsurface Drainage Field No. of ditches 2 exact length of each ditch 270 ft. width of ditches 3 ft. depth of ditches 18 MAX in.

French Drain Required: \_\_\_\_\_ Linear feet

Date: 8-5-02

Signed: [Signature]  
Environmental Health Specialist

This permit is subject to revocation if site plans or intended use change.



Repair is Prohibited to LAP in Front of house  
STUB out Plumbing shallow - 18" MAX Ditch Depth  
Must Meet on site.  
Do not Drive or Park on Septic System  
Maintain all set Back



HARNETT COUNTY HEALTH DEPARTMENT  
AUTORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department, Improvement Permit # 19557. 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.

Bass Built Homes 910 864-1253  
Name Telephone #

Address

1120  
Property Location SR# Road Name

Stone Cross 21 4(53x35) .4 ac  
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: 50 Ft.  
Septic Tank 1000 Pump Chamber \_\_\_\_\_

NITRIFICATION FIELD SPECIFICATIONS

Number of fields 1 # of lines per field 2 Length of lines 270 Ft.

Width of ditches 3 ft. Depth of ditches 18 in 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.

[Signature] 8-5-02  
Signature of Authorized Agent for Harnett County Date