## HAF TT COUNTY HEALTH DEPARTM

IL., ROVEMENT PERMIT

Nº 14481

## HAPNETT COUNTY HEALTH DEPAR ENT AUTI RIZATION TO CONSTRUCT

Owner or Authorized Agent
Name: Justin B. Bette. Telephone # 919.775.447
Address: 211 Pierron Dr. Fayetteville NC 28303
Property Location: SR # 1201 Road Name Ponderes a
New Installation Repair Septic Tank Nitrification Lines
Subdivision Lot # _ 7 H
Number of Bedrooms Proposed: Lot size:
Basement With Plumbing Without Plumbing
Water Supply: Well Public Minimum Well Setback: ft.
Type of System: Conventional Other Pomp to convent; and
Tank Volume: Septic Tank gallons Pump Chamber gallons
Nitrification Field Specifications
Number of fields Number of Lines per Field Length of lines OO +
Width of ditches $3$ ft. Depth of ditches $18-24$ 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.
Name: Byan M Swai R. S. Date: 8/4/98
(Revised 2/96)CNSTRCT.WPD