=03-5-5533

HART T COUNTY HEALTH DEPARTM T

Nº19710

IMPROVEMENT PERMIT

Be it ordained by the Harnett County Board of Health as follows: Section III, Item B. "No Person shall begin construc-

tion of any building at which a septic tank system is to be used for dis from the Harnett County Health Department."	posal of sewage without first o	btaining a written pern
Name: (owner) Robert Junes Cont	New Installation	☑ Septic Tank
Property Location: SR# 145 Ruls Ch. Rd.	_ Repairs	Nitrification Lin
	Lot #2	
Tax ID #	Quadrant #	
Number of Bedrooms Proposed:	Lot Size: 25, 270 ff	
Basement with Plumbing: Garage:	3	
Water Supply: Well Public Community	,	
Distance From Well: ft.		
Following is the minimum specifications for sewage disposal syfinal approval.	ystem on above captioned p	property. Subject to
Type of system: Conventional Other		
Size of tank: Septic Tank: _/OOO gallons	Pump Tank: gal	lons
Subsurface No. of exact length of each ditch 60	width of def. ft. ditches 7 ft. di	epth of tches <u>M-20</u> in.
French Drain Required: Linear feet	/ /	
Date: _	9/20/2002	
This permit is subject to revocation if site Signed.	Bryon Mc Lo	_ R.S.
plans or intended use change.	Environmental Hea	lth Specialist
* Maintain all settachs		
* Mendither on contor 129		
Ayengithe or course		
Pand Conficient		
Contract		
Jord Hosel	210	
21° 0 18 × 40°		
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HAI TT COUNTY HEALTH DEPARTMENT AUT ORIZATION TO CONSTRUC

Harnett County Health Departmen	t, Improvement P	Permit # 197/0	. This	
authorization shall be valid for a pe This authorization will be invalid if a				
Robert Jones Gra. Cont.			4-0383	
Name		Telepho		
P.O. Box 183 Bris Cro	eck N. (. 27	7506		
Address		1	,	
1415		Kul	<u>C/</u>	
Property Location SR#	and however at the little factor.	Road N		
Subdivision	Lot #	3	Lot size	
Subtrision	Lot#	# Bedrooms Proposed	Lot size	
TYPE OF SYSTEM				
New Installation [] Repair []	Septic Tank N	litrificiation Lines		
[Conventional Other [] Basement [] With Plumbing [] Without Plumbing				
Water Supply: [] Well [Public - Minimum Well Setback:Ft. Septic Tank Pump Chamber				
NITRIFICATION FIELD SPECIFICATIONS				
,				
Number of fields # of lines per field Length of lines 60 Ft.				
Width of ditches 3 ft. Depth of ditches 4.20 inches				
width of ditches n. Depth	of ditches 10.2	inches		
French Drain: Linear feet required	Donth of	Camoual		
French Drain: Linear leet required	Depth of	gravei		
No wastewater system shal	l be covered or	placed into use by ar	ny 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			
R Med Dr		//		
Signature of Authorized Agent for Harnett C	County	9/20/2002 Date		