HARNE COUNTY HEALTH DEPARTMEN

No19770 IMPROVEMENT PERMIT 3-5-5712

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." New Installation Septic Tank Terce Name: (owner) Property Location: SR#\_ ☐ Repairs Nitrification Line PRACHTREE Subdivision Lot # 5/ Quadrant # Tax ID #\_\_\_\_ 3(45x48) \_ Lot Size: 461 Number of Bedrooms Proposed: Basement with Plumbing: Garage: Public Public Community Distance From Well: \_\_ Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Type of system: Conventional Other\_ Septic Tank: 1003 Size of tank: Pump Tank: \_\_\_\_\_ gallons gallons Subsurface No. of exact length width of depth of of each ditches ft. ditches ft. ditches in. Drainage Field ditches\_ French Drain Required: \_\_\_\_\_ Linear feet Date: \_ 0 -This permit is subject to revocation if site Signed: \_ plans or intended use change. Environmental Health Specialist 110 RIJBORO STUB Ont Plumbing Shillow when shows Deve Depart on septic streets

Maintain All Set Backs - Do not Deve Depart on septic streets 0 A K

## NETT COUNTY HEALTH DEPARTM **AUTHORIZATION TO CONSTRUCT**

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.
Simmy Pierce 9/0-328-5257
Name U Telephone #
Address
Address
Property Location SR# Road Name
Peach Tree 5/ 3(45x48) 46/20
Subdivision Lot # # Bedrooms Proposed Lot size
TYPE OF SYSTEM
1
New Installation [ ] Repair   Septic Tank [ ] Nitrification Lines
VIA Comment of the Co
Conventional Other
[ ] Basement [ ] With Plumbing [ ] Without Plumbing
Water Supply: [ ] Well   Public - Minimum Well Setback: 5 Ft.  Septic Tank Pump Chamber  NITRIFICATION FIELD SPECIFICATIONS
Number of fields # of lines per field Length of lines Ft.
Width of ditches ft. Depth of ditches 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 of Authorized Agent for Harnett County  Date